Medicare Hospital

INFORMATION

Report

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MEDICARE HOSPITAL INFORMATION

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Volume 7

COLORADO

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FOREWORD

The mission of the Health Care Financing Administration (HCFA) is to promote the timely delivery of appropriate, quality health care to the nation's aged, disabled, and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible, and that agency policies and actions promote efficiency and quality within the total health care delivery system.

To that end, the annual release of the Medicare Hospital Information report is a key element in our continuing efforts to improve the effectiveness of medical practice and the quality of care provided to Medicare beneficiaries. It is also an important step in helping beneficiaries make more informed health care decisions.

The information in this release is not intended as a direct measure of quality of care. It is best used as a "screening tool"—that is, to identify potential problems for further review and, in consultation with medical staff, to evaluate a hospital's strengths and weaknesses. Thus, we believe that consumers can use this information to ask questions of their physicians, rather than reach judgments about the quality of care in a particular hospital. We also expect this information to be used by hospital administrators, physicians, peer review organizations, State survey and certification agencies, and researchers.

This publication presents information to answer the question "What is the actual mortality rate within a certain period of time for each hospital compared to the rate that would have been predicted, given what we know about the characteristics of the patients admitted?" Our basic approach to analyzing hospital mortality information has remained unchanged for the past five years; however, since the last publication of mortality information in May 1991, we have made some significant changes both in our methodology and in the way we display the results of our analysis. The four principal changes in the 1992 report are:

- A graphic presentation of the predicted and observed mortality rates for most hospitals for "All Causes" for Federal fiscal years 1988-1990 at 30, 90, and 180 days;

- The addition of information on certain variables that we use in computing the predicted mortality rates for each hospital;

- The addition of information on the geographic origin of each hospital's patients; and

- A comparison of the average length of stay in each hospital with the average for the State and Nation.

These refinements should make this information an even more valuable educational tool to help improve the quality of care in hospitals. The changes were reviewed by a panel of outside experts. The methodology used to calculate the observed mortality rate, the predicted mortality rate, and the standard deviation are briefly described in the Technical Information section of the Introduction to this volume and in more detail in the Technical Supplement (Volume 55).

We acknowledge the assistance we have received from the American Hospital Association—not only for providing the information detailing selected hospital characteristics, but also for alerting its members to the importance of this information. We are also grateful to the personnel in each hospital who took the time to review the data thoroughly and to provide us with comments and suggestions. As before, we have published individual hospitals' comments in their respective State volumes. Over the years, these communications have helped to improve and refine the information included in this publication.

HCFA is committed to improving the Medicare Hospital Information report. To that end, we are continuing to work with representatives of hospital, consumer, employer and other organizations to make this annual report as useful as possible for all consumers.

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INTRODUCTION

The Medicare Hospital Information report contains information on acute care hospitals that treated Medicare patients discharged in Federal fiscal year (FY) 1990 (October 1, 1989—September 30, 1990).

This year's publication set consists of 54 State volumes and a Technical Supplement (Volume 55). There is one volume per State, except that California and Texas have two volumes each, Hawaii is combined with American Samoa and Guam, and Puerto Rico and the Virgin Islands are combined together in one volume.

Each hospital's two summary data pages are arranged alphabetically by hospital name in each State volume. These data pages consist of:

- The hospital's FY 1990 Medicare hospital mortality rates;
- A graphic presentation of the predicted and observed mortality rates for **most** hospitals for "All Causes" for FYs 1988—1990 at 30, 90, and 180 days;
- The FY 1990 values for selected explanatory factors used to predict the mortality rates;
- Origins and lengths of stays of Medicare admissions; and
- Hospital characteristics, such as the number of beds and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals files or, when such information was not available from the AHA file, the Health Care Financing Administration's (HCFA) Online Survey, Certification and Reporting System (OSCAR) file.

> ***Please note that the information regarding origins and lengths of stays and hospital characteristics are presented strictly for information purposes only. They were not used to calculate the hospital's predicted mortality rates.***

Toward the end of each volume, we include both State and national mortality rates developed by our analysis, as well as the comments we received from individual hospitals.

DESCRIPTION OF MORTALITY INFORMATION

The mortality rates at a given hospital may reflect, among other factors, the age, sex, diagnoses, and severity of illness of patients admitted to that hospital, as well as the quality of care they received. Factors affecting health and the probability of death vary among the patient populations served by individual hospitals. Consequently, the mortality rates in different patient populations vary considerably.

These latest analyses of the mortality rates associated with Medicare hospitalizations are similar to those carried out in the four prior years. Only one hospitalization for every patient was used. As in last year's analysis, when a patient had multiple hospitalizations during the fiscal year, one stay was selected at random to be analyzed. We believe that the use of the randomly selected admission provides a better representation of a typical hospital admission and permits us to calculate mortality rates more nearly like those the hospital itself would calculate for its patients.

Although we publish data only on deaths which occur within 180 days of admission to the hospital, for purposes of analysis our methodology actually considers deaths which occur any time within 365 days of admission (with the exception that no date of death later than April 1, 1991 is used). This is part of the formula which assesses the long-term risk of mortality. With this approach, information about the early and later results of the hospitalization is provided. This is important because diseases evolve with different time courses, and treatments may have different short- and long-term effects. The choice of at least 180 days allows substantial followup consistent with timely reporting of HCFA data.

We again analyzed the data on a fiscal year, rather than on a calendar year, basis because it allows us to report on recent hospitalizations. Also, new Medicare rules are often instituted on a fiscal year basis.

For each hospital, mortality rates are presented for overall Medicare patient mortality and for eight medical conditions and nine procedures. The information consists of the number of Medicare patients; the observed or actual mortality rate (OBS); the predicted mortality rate (PRED), given the mix of patients; and a standard deviation (SD), a measure of the uncertainty of the predicted rate.

The following information will be helpful when reviewing specific information for any given hospital.

Number Of Cases

This is the number of individual Medicare beneficiaries whose discharge in a fiscal year from the short-term, acute care hospital listed was selected for analysis. The total number of cases randomly selected for each hospital is presented under the category "All Causes." The eight medical condition and nine surgical procedure categories are subgroupings drawn from the "All Causes" selection. Although a particular patient may appear in only one of the eight medical condition categories, that same patient may also appear in one or more of the nine surgical procedure categories. Similarly, a patient may appear in one or more of the nine surgical procedure categories, even though he or she was not included in any of the eight medical condition categories.

The categories chosen for display represent HCFA's interpretation of the categories judged to be important by various outside advisors including the Institute of Medicine. The listed condition and procedure categories do not cover the reason for admission of all the hospitalized Medicare patients in this study. (The ICD-9-CM codes included in each condition and procedure category appear in Table 1 following this Introduction section.)

These conditions and procedures represent the causes for the hospital admission and/or surgical episodes during that stay; they do not necessarily represent the cause of death. HCFA does not have access to cause of death information.

Observed Mortality Rate (OBS)

The observed mortality rate for each category is the percentage of each acute care hospital's selected Medicare patients who died within 30, 90, or 180 days of the selected admission. This rate does **not** represent the percentage whose death was caused by a particular condition or procedure.

The percentage is rounded to the nearest one-tenth of one percent. Both inhospital deaths and deaths occurring after discharge but within 30, 90, or 180 days of admission are included. For example, if a hospital had 1,000 patients included in the "All Causes" category and 124 of these patients died within 30 days of the selected admission, the 30-day observed mortality rate would be 12.4 percent; if an additional 17 patients died more than 30 but less than 91 days after admission, the 90-day observed mortality rate would be 14.1 percent; and if an additional 13 patients died more than 90 but less than 181 days after admission, the 180-day observed mortality rate would be 15.4 percent.

It is important to note that the observed mortality rate is cumulative; e.g., the 90-day observed mortality rate includes all deaths which occur within 30 days of admission, as well as those occurring more than 30 and less than 91 days after admission.

Predicted Mortality Rate (PRED)

The predicted mortality rate for each hospital's patients is derived in part by determining, based on national experience, the contribution to the probability of dying associated with various patient characteristics such as:

- Principal diagnosis (grouped into 23 analytical risk categories),
- Age,
- Sex,
- Previous hospital admissions within the prior six months,
- Admission source (e.g., physician reference, skilled nursing facility reference),
- Admission type (e.g., elective or emergency), and
- The presence of up to seven comorbid conditions—cancer, chronic cardiovascular disease, chronic renal disease, chronic liver disease, chronic pulmonary disease, cerebrovascular degeneration, and chronic diabetes. A list of the ICD-9-CM codes defining the comorbid conditions is in Table 2 following this Introduction section.

Standard Deviation (SD)

The standard deviation is a tool to gauge the extent to which the difference between the observed and predicted mortality rate is meaningful. In general, the greater the difference between the two rates, the greater the probability that the difference represents an actual variation from what would be expected in view of the national experience. The less chance that the difference between the PRED and the OBS can be attributed to statistical variability, the more grounds for possible concern about the institution's performance.

Information on how to use the SD to construct prediction intervals for use in assessing the real difference between the OBS and the PRED is included in the Technical Information section of this Introduction. The precision and interpretability of the estimates are weaker when there are no deaths or 50 or fewer cases in a particular category being analyzed. Thus, for these instances, dashes ("---") are placed in the SD column.

Observed Mortality Rate And Predicted Range For Medicare Patient Admissions For All Causes

Also in this year's report, we have presented graphs that display the information for most hospitals described above for FYs 1988 and 1989, as well as FY 1990. (In particular, these graphs could not be computed for hospitals that had 50 or fewer cases or no deaths in FYs 1988, 1989, or 1990). In constructing the graphs, we used 2 times the standard deviation to approximate a 95 percent prediction interval. The observed mortality is shown as a dot (•). The predicted mortality is shown at the middle of a range of mortality rates. The bottom of the range is the predicted mortality minus twice the standard deviation, and the top of the range represents the predicted mortality plus twice the standard deviation. The graphs for FY 1988 and FY 1989 are based on new random samples and new computations for this year's report. Thus, the calculations for some hospitals for FY 1988 and FY 1989 may be different from previous releases, because we are including more current data in this year's report.

FY 1990 Values For Selected Explanatory Factors Used To Predict Mortality Rates

This year's report includes the FY 1990 average at each hospital of many of the explanatory factors used to predict that hospital's mortality rates. This information provides a profile of the patients used in the analysis and should help to identify possible systematic coding errors in the claims data used to calculate the mortality rates. These percentages are derived from the patients included in the sample and should be applied to the total number of cases listed in "All Causes." It is important to note that neither the admission sources/types nor the comorbidities categories are mutually exclusive. For example, a patient could be both "referred by his personal physician" and "admitted for elective procedure." Similarly, a patient could have secondary diagnoses of both cancer and diabetes.

Information Sources And Notes

We believe that when the mortality rate information is properly understood and applied, it can be very useful; it can also be misleading if it is interpreted incorrectly. The information simply describes one of several possible outcomes at a hospital—postadmission mortality for Medicare beneficiaries.

Mortality information is not necessarily representative of a hospital's total performance in all aspects of patient care. Individual hospitals may have very good reasons for their rates being higher than the rates predicted by the HCFA model. For example, one hospital might have different death rates than another because its patient mix is not fully accounted for by the model.

Accordingly, we offered each hospital the opportunity to review their specific information and to provide comments to HCFA and the public, and we included those comments that were received timely at the end of this volume. Users should read the discussions about the uses and limitations of the mortality information found on page xiii, as well as any comments a hospital may have provided.

Hospitals In The Analysis

The hospitals included in this analysis are participating in Medicare as short-term, acute care facilities—all have a zero in the third position of their Medicare provider number. All other hospitals—those with something other than a zero in the third position of their provider number, such as rehabilitation facilities or psychiatric institutions—were excluded. This year, as in the past two years, we have also excluded hospices.

In some cases, we have included data for hospitals that closed, changed ownership, or changed management either during or subsequent to FY 1990. Our data included for those institutions reflects the situation as it existed at the time the hospitalizations analyzed occurred.

Data Sources

This report is based primarily on Medicare hospital billing information for Federal fiscal years 1988, 1989, and 1990. While the principal source of the data for the analysis was the HCFA-maintained Medicare Provider Analysis and Review (MEDPAR) file, which contains information about each Medicare hospitalization, some of the information about beneficiaries, such as date of death, was obtained from the Social Security Administration. Hospitals submit bills to HCFA's fiscal intermediaries (which handle claims for the inpatient care provided to Medicare beneficiaries) which, in turn, submit this information to HCFA. The file is updated on a quarterly basis. Our analysis was based on information available following the June 1991 update of the MEDPAR file. It is estimated that by that time (nine months after the close of the fiscal year), 98 percent of all Medicare discharges in FY 1990 are included in the file.

Possible Limitations Of The Data

In any large-scale data base, such as the one dealing with Medicare hospitalizations, there will be gaps or inaccuracies. For example, last year some hospitals had not accurately reported the source or type of admission, and thus erroneous information was included in the analysis for those hospitals. However, the fact that the files contain information on about 10 million hospital admissions to nearly 6,000 hospitals for each year provides some assurance that, for purposes of the statistical analysis conducted here, the information that might be

missing or inaccurate is such a small portion of the total that it would have little effect on the results for national estimates. Nevertheless, it may substantially affect an individual hospital if it were the source of the inaccurate information.

While we feel that the information used in this analysis is thorough and complete, there are a few points to keep in mind as you review the mortality information.

The information used is billing data; it is only as good as the information submitted by hospitals as part of the payment process. Although there is always a possibility that coding errors are included, we assume that, given the link to payment, hospitals have an incentive to submit bills accurately and promptly. We do know, however, that some hospitals submitted incomplete or erroneous data.

For example, following last year's public release of the hospital mortality data, several hospitals wrote to HCFA indicating that they had submitted incorrect data. Furthermore, they stated that if they had given us the correct information, their predicted mortality rates would have been higher than those presented in HCFA's report. Therefore, in this year's report we have annotated those hospitals' data pages with a footnote stating: "This hospital says that it submitted inaccurate data to Medicare and claims that its predicted mortality rate should be higher than that presented above." At this point, however, HCFA cannot confirm the validity of those hospitals' claims. The analysis results might very well be different if the data on which they were based were submitted accurately by those hospitals.

In our previous analysis of mortality data, we discovered that some States had zero admissions from a skilled nursing facility. While some of these problems were corrected on the MEDPAR files used for this analysis, at the time this study was initiated we found empirical evidence that some of the files still contained suspect information. The suspect data were identified by noting those months (date of discharge) and fiscal intermediaries for which the type and source of admission fields appeared to be interchanged. Based on our findings, we reversed these fields to at least partially correct the remaining discrepancies. The following list shows the specific instances for which the fields were reversed for this analysis.

TYPE AND SOURCE OF ADMISSION FLIPPED

FI No.	FI Name	Dates
00030	Arizona Blue Cross	10/01/86 — 12/31/88
00080	Maryland Blue Cross/DC	06/01/87 — 09/30/87
00190	Maryland Blue Cross	06/22/87 — 12/31/88
00400	Texas Blue Cross	12/07/87 — 12/31/88

How To Use This Information

There are several key points to remember about the use of this information. **First, it is important to understand that the difference between the hospitals' mortality rates and the predicted rates in the tables in this report may not be a direct measure of the quality of care rendered in the hospitals.**

Second, the usefulness of this information depends upon the accuracy with which mortality rates can be predicted. We do not currently have any direct measurement tool with which we can fully adjust for severity of patient illness differences among hospitals. For instance, two hospitals may have very different death rates for patients admitted for stroke, even after we have adjusted for age, sex, and several other factors. This might happen because one hospital's stroke patients may consist of a significant number who are admitted in a coma (and are thus more likely to die), whereas another hospital's patient population may represent a broader spectrum of patients with cerebrovascular problems, or because these two hospitals, in fact, do provide different levels of quality of care. In addition, other factors affecting the probability of death in a particular case (e.g., family status/support, overall health status of the patient, etc.) are not included in the predictive model because information on them is not readily available.

Nevertheless, we believe that the information presented in this publication is an important contribution to the health care community and should be helpful to a wide range of individuals and organizations including consumers, hospital administrators, physicians, PROs, and researchers.

Use By Consumers — Some Key Questions

Consumers should read carefully the explanations of the uses and limitations of the information. Listed below are some questions that we recommend a consumer think about before choosing a hospital. Please keep in mind that this is not a comprehensive list, but it should serve to illustrate the types of questions that are important to consider.

- Why are the hospital's observed mortality rates for "All Causes" consistently and significantly above the predicted rates for FY 1990?

- Why are the hospital's observed mortality rates for the condition for which I need treatment or the procedure I will undergo consistently and significantly above the predicted rates for FY 1990?

- How does this hospital's pattern of mortality compare with that of other hospitals in the State and Nation?

- Is the number of cases too small to present a satisfactory picture of the hospital?

- Does the hospital treat a large number of cases in the category for which I need treatment?

- Does the hospital treat a large number of patients who have several co-existing illnesses or who otherwise are likely to be "sicker" than average?

Other Users Of This Publication

Among other users of this publication, we expect that the hospital administrator (in consultation with medical staff) will find the information most useful as a screening tool to evaluate a hospital's strengths and weaknesses. We know that some hospitals and their medical staffs, using established and newly emerging quality assessment techniques, are seeking information that will result in improved health care delivery.

Outside Assistance In Developing This Publication

The development and presentation of the Medicare Hospital Information report continues to be an important part of HCFA's responsibilities in the health care community. To make the information as accurate and useful as possible, over the past several years we have discussed the theoretical framework and statistical approach with a number of nationally recognized technical experts in appropriate fields. Based on their recommendations, we believe that the models used in these analyses continue to be reasonable and appropriate.

In the past, we have conducted validation studies of our methodology. In general, these studies have found correlation between poor quality care and hospitals whose observed mortality rates significantly exceed the rates that would have been predicted. However, we have also found that detailed clinical data which more thoroughly characterize the severity of patient's illness, while they do not materially affect results describing the general pattern of mortality, do, in specific instances, alter our assessment of the comparison of the observed to the predicted mortality rates.

The format for presentation, the process for sharing the information with individual hospitals, and the statistical methodology have been discussed at various meetings with leaders of organizations representing Medicare beneficiaries, physicians, and hospitals. Also, we have spent many months reviewing the comments received from the hospitals regarding their patient-specific data for earlier years and our previous mortality information reports. Many suggestions from these sources have been incorporated into this report.

We have carefully investigated comments from individual hospitals on apparent discrepancies or errors generated in previous years. These discrepancies rarely had an effect on a hospital's overall mortality rate. Most of these instances fell into the following two broad categories.

- **Inaccurate Date of Death** — We found that inpatient billing coding errors (e.g., a hospital bill indicating that the patient's status at time of discharge was "expired" when the patient had, in fact, left the hospital alive) created many of these errors. We now have mechanisms in place that allow a continuous update of HCFA's master file, thereby enabling us to make corrections.

- **Discrepant Case Counts** — Our analysis counts only one acute care discharge in a fiscal year; normally, hospitals count each discharge. Thus, a patient admitted three times in a year would count three times for the hospital, but only once for the purpose of analyzing Medicare hospital mortality data presented in this report.

We believe it is important for consumers of health care to have access to as much information about hospitals as possible when making health care choices. Along with hospital characteristics information, we have added this year information about the origin and length of stay of Medicare admissions. This information is presented for comparative purposes only and was not used in calculating a hospital's predicted mortality rates. These data were not part of the analyses, and any errors or discrepancies in them do not affect the predicted mortality rates.

ORIGIN OF MEDICARE ADMISSIONS

Data on the geographic origin of each hospital's patients are presented in this year's report. We obtained from the Health Insurance Master file the State and county of residence for each Medicare beneficiary discharged from a Medicare-certified, acute care hospital during FY 1990. We then compared that information with the location of the hospital to determine the percentage of all discharges where the patient lived within the same city/county as the hospital location, within the State where the hospital is located, or outside the State. The percentages are derived by dividing the number of discharges of beneficiaries in a geographic category by the total number of Medicare discharges from the hospital. Please note that these are percentages of total Medicare discharges, not of the mortality sample alone.

MEDICARE AVERAGE LENGTH OF STAY

We obtained from the MEDPAR file the total days of care—both Medicare covered and noncovered—and divided that total by the number of discharges from each hospital. Total, rather than covered, days were used because, under the Prospective Payment System (PPS), if a Medicare patient has at least one day of hospital coverage available to him in the current spell of illness, the hospital will be paid the full diagnosis related group (DRG) amount plus any approved outlier amount, regardless of the number of days actually used.

Example: Hospital A had 2,513 Medicare discharges with a total of 24,379 days.

Calculation: $\frac{24{,}379}{2{,}513} = 9.7$ days

The Medicare average length of stay is 9.7 days.

HOSPITAL CHARACTERISTICS

As noted previously, we have again included information on selected hospital characteristics such as the number of beds, occupancy rate, ownership, staffing, and specialty services. This information was obtained from the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals, with the exception of the case mix index (CMI), which was derived from HCFA billing data. This file consists of information voluntarily reported by hospitals to the AHA. In instances where AHA data were unavailable, for example for hospitals that did not respond to the AHA survey, we derived the information from HCFA's Online Survey, Certification and Reporting system (OSCAR). The hospital characteristics and the specific special services listed were selected with the concurrence of the AHA as being those most meaningful to the Medicare population. Information on these specific data elements follows.

AHA Definitions (except for CMI)

Survey and Year — AHA 1990. Source is the American Hospital Association's 1990 Annual Survey of Hospital files.

Profile

Total beds (#) — Number of beds (including subacute beds), cribs, and pediatric and neonatal bassinets regularly maintained (set up, staffed, and ready for use) for inpatients as of the close of the reporting period; does not include bassinets for normal newborn infants.

Occupancy rate (percent) — Ratio of average daily census to the average number of beds (statistical beds) maintained during the 12-month reporting period. (NOTE: The number of these "statistical beds" may differ from the bed count at the close of the reporting period.)

Ownership/control — State government, local government, district/authority, church, private nonprofit, private for profit, or Federal Government.

Medicare discharges — The total number of inpatient discharges for Medicare patients for those hospitals selected for the mortality calculations, including all discharges for persons with more than one hospitalization during the year. (The mortality data include only one randomly selected discharge for each hospitalized enrollee. Therefore, this figure may reflect more discharges than the actual number of cases randomly selected for the mortality study.)

Case mix index (CMI) — A measure of the overall complexity of the Medicare cases treated by a given hospital compared to the complexity of the national average case mix. The CMI represents the relative costliness of each hospital's mix of cases compared to the national average mix of cases. A CMI of greater than one means that a hospital treats more complex cases than average. A CMI of less than one means that a hospital treats less complex cases than average. The CMI for each hospital is calculated on an annual basis. In this report, the CMI presented for each hospital is calculated based on its discharges in FY 1990.

A hospital's CMI is calculated by multiplying the number of cases in each DRG by the relative weight of that DRG, summing the products, and dividing the sum by the total number of cases for the year. For calculating the FY 1990 CMI, use the DRG relative weights published in the *Federal Register*, Volume 54, Number 169, pages 36468 ff., dated September 1, 1989.

Staffing (all AHA counts are as of 9/30/90)

Total number of physicians — Total active and associate medical staff.

Percent of physicians who are board-certified specialists — Physicians who have passed an examination given by a medical specialty board and have been certified by that board as a specialist.

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

Burn Unit — Provides more intensive care to severely burned patients than the usual acute nursing care provided in medical and surgical units. Beds must be set up and staffed in a unit specifically designated for this service.

Cardiac Intensive Care — Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel, and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure,

open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units. Beds must be set up and staffed in a unit(s) specifically designated for this service.

Comprehensive Geriatric — Provides diagnostic and evaluation services that determine elderly patients' long-term care needs. It includes the assessment of medical conditions, functional activities, and mental and emotional conditions, and incorporates these into a treatment plan which includes family and financial concerns as well as medical needs.

Hospice Care — A program providing primarily medical relief of pain and support services to terminally ill patients and assistance to their families in adjusting to the patients' illness and death.

Medical/Surgical Intensive Care — Provides nursing care to adult and/or pediatric patients of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Included are medical-surgical, pediatric, and psychiatric (isolation) units. These units are staffed with specially trained nursing personnel, and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or life-threatening conditions, require intensified, comprehensive observation and care. These units may also include cardiac care when such services are not approved in a distinct cardiac care unit. This category is called "intensive care unit" in OSCAR.

Organ/Tissue Transplant — The hospital has the necessary staff and equipment to perform the surgical removal of a viable human organ or tissue from a donor, either living or deceased, and the surgical grafting of the organ/tissue to a suitably evaluated and prepared patient.

Other Intensive Care — Provides nursing care to adult and/or pediatric patients with a specialized disease or condition of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Examples reported include oncology or spinal cord injuries. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment appropriate for the patients' specialized conditions.

Trauma Center — Provides emergency and specialized intensive care to critically injured patients.

Other Specialty/Hospital-Based Services

Alcohol/Drug — Hospital services for the medical care and/or rehabilitative treatment of outpatients whose primary diagnosis is alcoholism or other chemical dependency.

Rehabilitation — A unit having designated beds and providing a comprehensive array of multidisciplinary medical rehabilitation services.

Psychiatric — Care provided to emotionally disturbed, chronically mentally ill, mentally disordered, or other mentally incompetent patients on the basis of physicians' orders and approved nursing care plans. Beds must be set up and staffed in units specifically designated for this service.

Medicare Swing Beds — The hospital is certified by Medicare to provide "swing bed" services; that is, some acute care beds can be used for skilled nursing facility type care in the hospital for Medicare purposes.

OSCAR Definitions (except for CMI)

Survey and Year — HCFA, most recent year. Data were derived from the Online Survey, Certification and Reporting System (OSCAR).

Profile

Total beds (#) — Total number of operational beds eligible for Medicare payment.

Ownership/control — Church; private, nonprofit; other nonprofit; proprietary; Federal Government; State government; local government; and hospital district or authority.

Case mix index (CMI) — See definition shown in AHA "Profile" section.

Staffing

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

NOTE: There are no specific definitions of specialty services in OSCAR. Characteristics are self-reported by each hospital at initial Medicare certification and recertification, and are generally understood to parallel the explicit AHA definitions (above). The AHA categories "comprehensive geriatric" and "other intensive care" are not available in OSCAR. However, they may be included in the OSCAR category of other specialty services (not shown in table).

Coronary Care — See definition shown in AHA "Specialty Services" section.

Intensive Care Unit — See definition shown in AHA "Specialty Services" section. These units may also include other intensive care units in OSCAR reporting.

Organ Transplant — See definition shown in AHA "Organ/Tissue Transplant" section. May include tissue transplants because there is not a separate field in OSCAR for these services.

TECHNICAL INFORMATION

DATA SOURCES

The data analyzed in this report are obtained from the Medicare Provider Analysis and Review (MEDPAR) file for the fiscal years 1987-1990, which contains information on the hospital stays of Medicare beneficiaries. The principal sources of data for this file are the bills (known as HCFA-1450 or UB-82) submitted by the hospitals to HCFA through fiscal intermediaries. The MEDPAR file also contains data about the beneficiaries, such as age, sex, and date of death, which are obtained from the Social Security Administration, the Railroad Retirement Board, or the Office of Personnel Management.

Hospital stays with discharges in fiscal years 1988, 1989, and 1990 were used in these analyses. Hospital stays in 1987 were used only to characterize the prior admissions of the patients in the 1987 cohort. Only acute care hospital stays in short-term (general and specialty) hospitals were selected. These hospitals have a "0" in the third position of their Medicare provider number. Hospital stays in institutions (designated by a "9" in the fourth position of the provider number) and hospital stays in psychiatric units, rehabilitation units, swing-beds and alcohol/drug units (with "special unit codes" of S, T, U and V, respectively, in the third position) were excluded.

THE MORTALITY MODEL

For each beneficiary in each year one hospitalization was selected at random. Choosing a specific hospitalization is necessary to avoid multiple counting of the same death for that year. Selecting a random hospitalization instead of the first or last in the year produces mortality rates that are more representative of the rates that a hospital might calculate for its patients. Also, the mortality rates based on this random selection process reflect an intermediate position between the rates produced by the alternatives.

The selected hospital stays were analyzed separately by analytical category. The analytical categories were created by grouping ICD-9-CM diagnosis codes that had similar mortality patterns. The procedures for creating the analytical categories and the groups of ICD-9-CM diagnosis codes that defined them are detailed in the Technical Supplement.

The mortality experience of the patients was evaluated as a function of time within 365 days of the admission. The factors included in the mortality model used to evaluate each patient's probabilities of death are given in Table 3. They consist of demographic characteristics (age and sex), major comorbidities (chronic diseases likely to have been present at admission and believed to

complicate management and increase the likelihood of an adverse outcome), prior admissions (grouped into five risk or severity levels) within the 6 months preceding the admission evaluated, admission type (emergent, elective, etc.), and admission source (referral from the physician's office, the nursing facility, etc.). The specific reason for the admission (the principal diagnosis) and the performance of selected surgical procedures were additional factors used in the estimation of the predicted probability of death (see below).

The observed mortality rate for a hospital was calculated by means of the lifetable method ("The LIFETEST Procedure," Chapter 22, SAS User's Guide: Statistics, Version 5 Edition, pages 529-557).

ANALYTIC TECHNIQUES

A time-to-event or survival model with explanatory or concomitant variables was used to ascertain the influence of the patient characteristics listed above on the probability of death. A feature of such a model is allowance for "right censored" observations. Generally, these are events or outcomes which would have occurred but for some interference that prevents further observation. In the present analysis, "right censoring" occurs when a patient is withdrawn alive from the study April 1, 1991 or at the end of the followup period of 365 days.

The survival function, S(t), is one of several equivalent ways of expressing the model. Another form uses the cumulative distribution function or the mortality function

$$F(t) = 1 - S(t).$$

Another useful formulation of these models is the hazard function, h(t), also known as the force of mortality or risk function. The hazard is the rate of decrease in the number of survivors relative to the number of survivors at a specific time. Mathematically, the hazard function is

$$h(t) = -\frac{1}{S(t)}\frac{dS(t)}{dt} = -\frac{d\ln(S(t))}{dt}.$$

The probability density function, f(t), commonly used in statistical texts can be expressed as follows:

$$f(t) = \frac{dF(t)}{dt} = h(t)S(t).$$

The area under the survival curve is the expected value for t. In some cases, the area under the survival curve is restricted to an interval $0\text{-}t_1$ where t_1 might be one year, for example.

The specific time-to-event or survival model used in the present analysis is Bailey's modification of the Makeham model. The survival function for the Bailey-Makeham model is

$$S(t) = \exp\left\{-\delta t - \left(\frac{\alpha}{\gamma}\right)(1 - \exp(-\gamma t))\right\}$$

where

$$\alpha = \exp(\alpha_0+\alpha_1 x_1+\ldots+\alpha_i x_i+\ldots+\alpha_k x_k)$$
$$\gamma = \exp(\gamma_0+\gamma_1 x_1+\ldots+\gamma_i x_i+\ldots+\gamma_k x_k)$$
$$\delta = \exp(\delta_0+\delta_1 x_1+\ldots+\delta_i x_i+\ldots+\delta_k x_k)$$

are the expressions for each of the structural parameters α, γ, and δ in terms of the k concomitant variables x_i and their associated component parameters α_i, γ_i, and δ_i for i=1, 2,..., k and three intercepts or component parameters α_0, γ_0, and δ_0. The structural parameter δ is the long-term risk which is approached as $t \rightarrow \infty$. The structural parameter α is the initial excess risk which decays with rate constant γ.

For the survival function given above, the risk or hazard function has an especially tractable form of an exponential decay which approaches a long-term risk, δ. The hazard function corresponding to the survival function above is

$$h(t) = \alpha\exp(-\gamma t) + \delta .$$

The estimation of the component parameters was carried out in a series of steps in which those covariates which had estimable and statistically significant ($p<0.05$) influences of the probability of death were identified for inclusion in the model. As the model for each of the 23 risk categories was estimated separately, different lists of covariates were used for the final core models.

This first step was followed by the estimation of the additional contribution of specific principal diagnoses in each risk category. In these analyses, the effects of the patient characteristics included in the core models were corrected for. Only those principal diagnoses were retained which were estimable and had more than 900 cases (more than 300 for codes identified by year). Similarly, after adjustment for the effects of both the variables in the core model and the principal diagnoses, correction terms were calculated to estimate the additional information about the probability of death associated with the categorization of the patients into the clinical groups used for the presentation of the data in the mortality tables (see below). These correction terms were negligible for the medical categories but substantial for the surgical categories.

Once the component parameters or regression coefficients α_i, γ_i, and δ_i have been estimated, the predicted probability of patient death at any specified time after admission, 1-S(t), may be calculated for all individuals. To obtain the predicted mortality rate up to a given time for a hospital, it is then only necessary to average over the predicted probabilities of death of its patients to that time.

The analytical categories are useful for grouping the patients into relatively risk-homogeneous strata for the regressions. However, to gain insights into patterns of practice at hospitals, the data are presented for patients grouped into clinically meaningful medical and surgical categories. The 17 clinical categories used in the mortality tables and defined in Table 1 were identified by the Institute of Medicine as being of particular medical and epidemiologic interest.

Estimation of the Standard Deviation for Predicted Mortality

The standard deviation of the predicted mortality rate is used to assess how statistically different the observed mortality rate is from the rate predicted by the national experience with like patients. The standard deviation depends, in fact, on the variance of the residual or the difference between the observed, P, and predicted, $\hat{\Theta}$, mortality rates.

The residual has four components V_1, V_2 , V_3, and V_4 where V_1 is the variance of the estimate of the predicted probability of death. This computationally intensive term was negligible for nearly all cases, compared to other components of variance. Consequently, this term was not included in the present analysis.

V_2 is the binomial variance for n patients

$$V_2 = \frac{\hat{\Theta}\left(1 - \hat{\Theta}\right)}{n}.$$

V_3 is the variation among hospitals not explained by the mortality regression models containing the patient characteristics described above.

$$V_3 = \widehat{\mathrm{Var}(\Theta)} = \left(1 - \frac{1}{n}\right) \widehat{M_2(\Theta)}$$

where

$$\widehat{M_2(\Theta)} = \left\{ \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics and} \\ \text{adjustment for hospital effects} \end{array} \right) - \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics,} \\ \text{but omitting the hospital specific effects} \end{array} \right) \right\}^2 \left(\frac{1}{z_p^2} \right)$$

The quantity z_p corresponds to the statistical significance (p-value) of the hospital-specific effect.

V_4 is the variation not explained by the mortality regression models which each include, in addition, an indicator variable for the hospital:

$$V_4 = \left\{ \left(\text{Observed mortality} \right) - \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics, and} \\ \text{adjustment for the hospital specific effects} \end{array} \right) \right\}^2 .$$

(The regression coefficients of the indicator variable for the hospital are a measure of the influence on the probability of patient death of factors not otherwise specified in the model. These factors include severity of illness not adequately reported on by the patient characteristics deduced from the claims data and the hospital's pattern of practice; i.e., performance.)

The standard deviation given in the mortality tables is just

$$SD = \sqrt{V_2 + V_3 + V_4}.$$

STANDARDIZED MORTALITY RATIO (SMR)

Another method of evaluating a hospital's performance—the Standardized Mortality Ratio (SMR)—is obtained by dividing the observed mortality rate by the predicted mortality rate. An SMR of one means the observed and predicted mortality are equal. A ratio greater than one means the observed mortality exceeds the predicted. A ratio less than one means the observed mortality is less than expected. The more extreme the ratio (significantly greater than one indicating unusually high mortality and significantly less than one indicating unusually low mortality), the greater the attention which should be paid to the results of this mortality report.

For each of the conditions and procedures, selected percentiles for the observed distribution of the SMR are displayed in Table 4. The selected percentiles provide benchmarks for comparison. For example, for a hospital

with 300 cases in the "All Causes" category, with observed mortality of 12.2 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 12.2/10.0 = 1.22.

Note that an SMR of one means the observed and predicted mortality are equal, while a ratio greater than one means the observed mortality exceeds the predicted, and a ratio less than one means the observed mortality is less than expected. There will be greater interest in the more extreme ratios, either greater than one — excessively high mortality — or less than one — extremely low mortality.

From Table 4 for FY 1990, we find that the ratio is just below the 75th percentile of 1.23. Hence, slightly under 75 percent of the hospitals have an SMR less than that found at this hospital.

However, for a hospital with 900 cases in the "All Causes" category, with observed mortality of 19.3 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 19.3/10.0 = 1.93.

Since the SMR of 1.93 is greater than the 97.5 percentile of 1.35 (Table 4 for 750 or more cases), there is cause for concern. To further assess this, we examine the displayed data in terms of the measure of uncertainty, the standard deviation.

Measures of Uncertainty

In principle, to use the standard normal approximations to determine prediction intervals, an adjustment must be applied for the skewness and kurtosis inherent in a mortality rate when the rate is considerably less than 50 percent and the number of cases is small. Table 5 presents the multiplicative factors, based on the binomial distribution, for the standard deviation needed to construct prediction intervals for the mortality rates at confidence levels of 75, 95 and 99 percent. Because of the approximations involved in the estimation of the skewness and kurtosis corrections, their precision decreases as the number of cases and the mortality rate decrease; i.e., as the value of the correction increases. In addition, because of simplifications and approximations in the estimation of the standard deviation, the precision of the multiplicative factors given in Table 5 exceeds the precision of the estimate of the standard deviation. Hence, the following rule-of-thumb represents an adequate approximation to the factors in Table 5 and an adequate guide to the **statistical meaningfulness** of the difference between the observed and the predicted mortality rates.

To illustrate the use of Table 5, consider a hospital with 75 cases and a predicted mortality of 13.0 percent with a standard deviation of 5.0 percent. Overall, for hospitals with patients with characteristics similar to those of this hospital, we would expect the actual or observed mortality rate to lie, 95 percent of the time, either between 13.0 percent and 22.9 percent if the actual is larger than the predicted, or between 3.3 percent and 13.0 percent if the actual is less than the predicted. That is because 22.9 percent = 13.0 percent + 1.98 x 5.0 percent, the factor 1.98 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Upper Bound," the row "75" for the number of cases, and, by interpolation, between the "10 percent" and the "20 percent" predicted mortality rate columns. Similarly, 3.3 percent = 13.0 percent - 1.94 x 5.0 percent, the factor -1.94 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Lower Bound" and the corresponding row and columns.

Therefore, in comparing the actual and predicted rates, more attention should be given to the hospital whose observed mortality rate lies beyond the bounds calculated for the 99 percent prediction interval than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 95 percent prediction interval. Likewise, more attention should be given to that hospital than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 75 percent prediction interval.

For the graphs, the observed mortality and an approximate 95 percent prediction interval are displayed. The prediction interval has bounds at the predicted mortality plus 2 times the standard deviation and at the predicted minus 2 times the standard deviation.

In the mortality rate tables, the observed and predicted mortality rates and the standard deviation as a measure for statistical importance of the difference are displayed for the overall and each of the conditions and procedures.

How To Obtain Medicare Hospital Information

The publication has been widely distributed to State health organizations and hospital and medical associations. The publication is available to the public for purchase in 55 volumes, with each volume being sold separately through the Government Printing Office (GPO). More detailed information about the purchase of this publication may be obtained by contacting:

Superintendent of Documents
Government Printing Office
Washington, D.C. 20402
Telephone: (202) 783-3238

As in prior years, the information appearing in the Medicare Hospital Information report is available in machine-readable/electronic format (tape and diskette). The Medicare Hospital Information public use file provides the published information as contained in the 55-volume hardcopy publication, except that the AHA's hospital characteristics are not on this file. Hospital characteristics from HCFA files (OSCAR) are provided instead. The files contain additional information which is useful for supplemental analyses: averages by hospital, MSA, and State for each of the variables used in the model, mortality rates for 15, 30, 60, 90 and 180 days, and cross-reference files which relate State, MSA, and ICD-9-CM codes used to a name. These data should allow analysts to assess an individual hospital's performance in comparison to all hospitals in the State or applicable MSA.

Also available to **hospitals** in machine-readable format is their patient-specific data that were used in the report. These data include the patient variables used in the analysis (e.g., the number and severity level of prior hospitalizations considered by the methodology, admission source and type, etc.) and the predicted probability of death at each time interval for each individual included in the study. With these data it is possible for hospitals to better understand their statistics. **Due to confidentiality considerations, requests for patient-specific data must be forwarded on hospital letterhead, must include the institution's Medicare provider number, and must be signed by the hospital administrator.**

For information about obtaining Medicare Hospital Information electronic media data, please contact HCFA's Bureau of Data Management and Strategy at:

Health Care Financing Administration
Bureau of Data Management and Strategy
Office of Statistics and Data Management
3-A-10 Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207
Telephone: (410) 597-5151

Table 1

DIAGNOSTIC AND PROCEDURE CATEGORIES

The following lists the ICD-9-CM diagnostic and procedure codes used to classify and group patients for presentation

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Heart Disorders/Procedures	
Acute Myocardial Infarction (AMI)	All of 410 (D) (on 10/1/89 exclude 410 with 5th digit of a 2)
Note: *For code 410 a 5th digit was added on October 1, 1989.*	
Congestive Heart Failure (CHF)	398.91, 402.01, 402.11, 402.91, 428.0, 428.1, 428.9 (all D)
Angioplasty (ANGPLSTY)	All of 36.0 (P) excluding 36.00, 36.03, 36.04, 36.09 (all P)
Note: *Code 36.0 had a 4th digit added on October 1, 1986. Code 36.0 got digits of 0, 1, 2, 3, and 9, and code 36.04 got some previously coded cases of 39.97. On October 1, 1987, code 36.01 was divided into 36.01 and 36.05, and some cases from 36.02 were put into 36.05.*	
Coronary Artery Bypass Graft (CABG)	All of 36.1(P) and not Angioplasty (see above)
Pacemaker Insertion, Initial (PACE)	37.73, 37.74, 37.75, 37.77 (after 10/1/87 use 37.70 through 37.73) (all P)
Note: *Code 37.70 was restructured on October 1, 1987. Previously the code contained both leads and devices. On October 1 these were separated and devices were coded as 37.80 through 37.83, and codes for the leads were changed into various 37.70 codes.*	

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Pulmonary Disorders	
Pneumonia/Influenza (PNU)	All of 480, all of 481, 482.2, 482.3, 482.9, 483, 485, 486, 487.0 (all D)
Chronic Obstructive Pulmonary (COPD)	All of 491, all of 492, all of 494, Disease all of 496; and 466.0, 518.82, 518.5, and 786.09 when there is a secondary diagnosis of any 496 (all D)
Note: *Code 518.8 got a 5th digit on October l, 1987. Some cases from 799.1 were put into codes 518.81 and 518.82.*	
Cerebrovascular Disorders/Procedures	
Transient Cerebral Ischemia (TCI)	433.1, 433.3, 435 (D) and exclude those patients with an endarterectomy at the time of admission—38.12(P)
Stroke (STK)	431, 434 through 434.9, 436 (all D)
Carotid Endarterectomy (ENDART)	38.12 (P) with 433.1 (D); 433.3 (D) or 435(D) as a principal diagnosis
Musculoskeletal Disorders/Procedures	
Fracture of Neck of Femur (FXHIP)	All of 820 (D)
Hip Replacement/Revision (HIPREP)	81.5, 81.6 (exclude 81.69) (all P). On 10/1/89 code 81.51 (P) through 81.53 (P) with same diagnoses.
Open Reduction of Fractured Femur (OPRDUX)	79.35(P) on condition of 820 (D) as principal diagnosis

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Genitourinary Disorders/Procedures	
Prostatectomy (PROS)	60.2, 60.3 through 60.69 (all P)
Hysterectomy (HYS)	68.3 through 68.7 (P)
Gastrointestinal Disorders/Procedures	
Cholecystectomy (CHOLOTMY)	51.22 (P)
Sepsis	
Sepsis	003.1, 020.2, 022.3, 036.2, 036.3, 036.89, 036.9, 038.0, 038.1, 038.2, 038.3, 038.40, 038.41, 038.42, 038.43, 038.44, 038.49, 038.8, 038.9, 054.5

Table 2

COMORBIDITY CONDITIONS
(all are D codes)

COMORBIDITY	ICD-9-CM CODES
Cancer	141-160.9, 162-172.9, 174-208.91
Chronic cardiovascular disease	412-414.9, 426-429.1
Chronic liver disease	571-572.8
Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
Chronic diabetes	250.01, 250.1-250.91
Chronic pulmonary disease	491-493.91, 496
Cerebrovascular degeneration	290-290.9, 294-299.9

Table 3

EXPLANATORY VARIABLES FOR THE MORTALITY MODEL

Generally the same variables are used for all diagnostic categories.

Demographics

SXFM — An indicator variable: = 1 if Female, 0 otherwise

AGEFM = AGESP if SXFM = 1, 0 otherwise
AGEML = AGESP if SXFM = 0, 0 otherwise

where

$$AGESP = \text{sign}(W-65)\left(\left|\frac{W-65}{65}\right|\right)^{1.44}$$

and

$$W = \left\{ \begin{array}{c} 23 \text{ if } AGE \leq 23 \\ AGE \text{ if } 23 < AGE < 100 \\ 100 \text{ if } 100 \leq AGE \end{array} \right\}$$

Comorbidities		**ICD-9-CM Codes**
(Indicator variables = 1 if comorbidity present on current or prior admission with discharge within 6 months prior to current admission, 0 otherwise)		
CCA	Cancer	141-160.9, 162-172.9, 174-208.91
CCV	Chronic cardiovascular disease	412-414.9, 426-429.1
CLV	Chronic liver disease	571-572.8
CRN	Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
CDI	Chronic diabetes	250.01, 250.1-250.91
COP	Chronic pulmonary disease	491-493.91, 496
CCE	Cerebrovascular degeneration	290-290.9, 294-299.9

Co Occurrence of Comorbidities

COP_CCV	1 if COP = 1 and CCV = 1, 0 otherwise
CCA_CCV	1 if CCA = 1 and CCV = 1, 0 otherwise
COP_CCA	1 if COP = 1 and CCA = 1, 0 otherwise
CCE_CCV	1 if CCE = 1 and CCV = 1, 0 otherwise
CRN_CCV	1 if CRN = 1 and CCV = 1, 0 otherwise

Admission Sources and Types

(Indicator variables = 1 if source or type present, 0 otherwise)

PREF	Patient referred by personal or HMO physician
TRSNF	Patient transferred from skilled nursing facility
ELCT	Patient admitted for elective procedure
EMRG	Patient admitted for emergency

Co-Occurrence of Admission Source and Type

PREF_ELEC = 1 if PREF = 1 and ELCT = 1, 0 otherwise

Previous Hospitalizations

P_RISK1	Number at 1st risk level with 3 or more set to 3
P_RISK2	Number at 2nd risk level with 3 or more set to 3
P_RISK3	Number at 3rd risk level with 3 or more set to 3
P_RISK4	Number at 4th risk level with 4 or more set to 4
P_RISK5	Number at 5th risk level with 3 or more set to 3
F(T)	Probability of death from previous admission if discharge within 182 days of current admission, 0 otherwise

Time Trend

FLAG89	1 if discharge in FY1989, 0 otherwise
FLAG90	1 if discharge in FY1990, 0 otherwise
INYEAR	Difference between current admission date and April 1 of fiscal year of discharge

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1990

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2645	0.45	0.88	1.04	1.23	1.72	0.56	0.90	1.03	1.17	1.54	0.61	0.90	1.02	1.15	1.46
OVERALL(>= 750 CASES)	2684	0.73	0.91	0.99	1.09	1.35	0.79	0.94	1.01	1.09	1.28	0.82	0.94	1.01	1.08	1.24
CONDITIONS																
AMI	1405	0.54	0.80	0.95	1.11	1.42	0.62	0.86	0.99	1.14	1.44	0.63	0.86	0.99	1.13	1.39
CHF	2335	0.43	0.79	0.98	1.17	1.64	0.60	0.85	0.99	1.13	1.49	0.66	0.89	1.00	1.13	1.41
PNEUMONIA/INFLUENZA	2428	0.41	0.78	0.97	1.18	1.68	0.53	0.84	1.00	1.17	1.55	0.57	0.86	1.01	1.16	1.50
COPD	435	0.00	0.63	0.97	1.34	2.06	0.30	0.78	1.02	1.26	1.74	0.40	0.82	1.01	1.24	1.69
TRANS. CEREBRAL ISCHEMIA	404	0.00	0.00	0.83	1.34	3.20	0.00	0.48	0.85	1.31	2.27	0.21	0.60	0.90	1.21	2.05
STROKE	1789	0.53	0.79	0.95	1.13	1.56	0.61	0.84	0.98	1.13	1.47	0.65	0.87	0.99	1.12	1.42
HIP FRACTURE	1199	0.21	0.67	0.93	1.27	2.10	0.40	0.76	0.94	1.19	1.80	0.47	0.78	0.97	1.16	1.64
SEPSIS	254	0.51	0.79	0.96	1.12	1.50	0.65	0.86	0.99	1.13	1.47	0.69	0.89	1.01	1.15	1.44
PROCEDURES																
ANGIOPLASTY	425	0.00	0.49	0.89	1.33	2.66	0.00	0.60	0.93	1.36	2.34	0.00	0.63	0.97	1.34	2.14
CABG	556	0.20	0.68	1.03	1.39	2.45	0.28	0.73	1.00	1.32	2.09	0.28	0.73	1.01	1.30	2.10
PACEMAKER	112	0.00	0.41	0.72	1.37	3.25	0.20	0.61	0.90	1.21	2.17	0.21	0.65	0.84	1.16	1.87
CAROTID ENDARTERECTOMY	73	0.00	0.00	0.85	1.33	2.90	0.00	0.14	0.74	1.28	2.43	0.00	0.42	0.86	1.38	2.86
HIP REPLACEMENT	763	0.00	0.53	0.94	1.44	2.77	0.19	0.67	0.96	1.31	2.12	0.26	0.71	0.94	1.26	1.91
REDUCT. OF HIP FRACTURE	276	0.00	0.56	0.86	1.22	2.05	0.31	0.68	0.92	1.19	1.76	0.38	0.77	0.96	1.12	1.58
PROSTATECTOMY	1576	0.00	0.00	0.73	1.57	3.56	0.00	0.49	0.91	1.40	2.63	0.00	0.57	0.92	1.29	2.21
CHOLECYSTECTOMY	714	0.00	0.49	0.95	1.54	2.68	0.00	0.62	0.93	1.37	2.22	0.22	0.67	0.98	1.27	1.93
HYSTERECTOMY	113	0.00	0.00	0.00	2.00	6.69	0.00	0.00	0.76	1.70	3.59	0.00	0.24	0.75	1.27	2.91

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1989

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2746	0.50	0.87	1.04	1.23	1.73	0.58	0.89	1.03	1.17	1.54	0.61	0.89	1.01	1.14	1.44
OVERALL(>= 750 CASES)	2669	0.71	0.90	1.00	1.09	1.35	0.79	0.94	1.01	1.08	1.28	0.82	0.95	1.01	1.07	1.24
CONDITIONS																
AMI	1412	0.53	0.81	0.96	1.12	1.47	0.59	0.86	1.01	1.15	1.47	0.63	0.87	1.00	1.14	1.43
CHF	2293	0.47	0.80	0.97	1.18	1.69	0.58	0.86	1.00	1.14	1.48	0.66	0.89	1.02	1.14	1.40
PNEUMONIA/INFLUENZA	2179	0.45	0.77	0.97	1.19	1.67	0.54	0.85	1.01	1.18	1.55	0.60	0.86	1.02	1.18	1.51
COPD	324	0.21	0.68	0.99	1.32	2.13	0.44	0.78	1.04	1.27	1.91	0.49	0.84	1.04	1.24	1.66
TRANS. CEREBRAL ISCHEMIA	420	0.00	0.00	0.79	1.41	3.26	0.00	0.46	0.88	1.33	2.36	0.18	0.60	0.92	1.25	1.97
STROKE	1728	0.53	0.80	0.95	1.12	1.56	0.62	0.85	0.97	1.11	1.46	0.67	0.88	0.99	1.13	1.40
HIP FRACTURE	1126	0.24	0.67	0.95	1.30	2.04	0.39	0.75	0.98	1.21	1.71	0.46	0.78	0.97	1.18	1.59
SEPSIS	174	0.52	0.79	0.94	1.10	1.52	0.63	0.88	1.02	1.15	1.46	0.68	0.93	1.05	1.16	1.43
PROCEDURES																
ANGIOPLASTY	370	0.00	0.46	0.84	1.35	2.55	0.00	0.55	0.88	1.33	2.52	0.00	0.61	0.94	1.32	2.44
CABG	501	0.21	0.65	1.00	1.47	2.57	0.23	0.69	1.00	1.33	2.29	0.32	0.74	1.01	1.33	2.21
PACEMAKER	91	0.00	0.52	0.74	1.12	2.31	0.00	0.56	0.83	1.15	2.14	0.20	0.68	0.81	1.16	1.87
CAROTID ENDARTERECTOMY	55	0.00	0.00	0.82	1.51	5.01	0.00	0.47	0.86	1.31	4.00	0.00	0.43	0.85	1.28	3.12
HIP REPLACEMENT	686	0.00	0.52	0.92	1.44	2.46	0.00	0.65	0.94	1.27	1.95	0.21	0.67	0.94	1.19	1.75
REDUCT. OF HIP FRACTURE	246	0.19	0.57	0.91	1.23	1.96	0.31	0.71	0.96	1.19	1.74	0.41	0.78	0.96	1.13	1.53
PROSTATECTOMY	1570	0.00	0.00	0.67	1.50	3.46	0.00	0.47	0.86	1.36	2.67	0.00	0.58	0.93	1.28	2.15
CHOLECYSTECTOMY	680	0.00	0.53	0.94	1.53	2.90	0.00	0.62	0.97	1.36	2.15	0.22	0.66	0.95	1.26	1.98
HYSTERECTOMY	101	0.00	0.00	0.00	1.80	5.44	0.00	0.00	0.78	1.60	4.21	0.00	0.00	0.91	1.38	2.99

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1988

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2838	0.46	0.89	1.05	1.23	1.75	0.54	0.90	1.03	1.16	1.57	0.59	0.90	1.02	1.14	1.45
OVERALL(>= 750 CASES)	2693	0.73	0.90	1.00	1.10	1.35	0.79	0.94	1.01	1.09	1.27	0.82	0.95	1.01	1.08	1.24
CONDITIONS																
AMI	1414	0.56	0.82	0.96	1.12	1.41	0.63	0.87	1.01	1.14	1.42	0.65	0.89	1.00	1.13	1.39
CHF	2246	0.45	0.79	0.97	1.18	1.61	0.60	0.86	1.00	1.14	1.43	0.68	0.90	1.02	1.13	1.37
PNEUMONIA/INFLUENZA	2069	0.44	0.79	0.97	1.17	1.68	0.57	0.85	1.01	1.17	1.59	0.61	0.87	1.01	1.16	1.53
COPD	310	0.21	0.67	0.92	1.30	2.17	0.39	0.79	0.98	1.20	1.81	0.51	0.82	0.99	1.19	1.59
TRANS. CEREBRAL ISCHEMIA	495	0.00	0.00	0.84	1.48	2.94	0.00	0.48	0.92	1.39	2.28	0.21	0.60	0.92	1.27	1.92
STROKE	1726	0.51	0.79	0.95	1.12	1.56	0.60	0.84	0.98	1.13	1.44	0.64	0.88	1.00	1.13	1.42
HIP FRACTURE	1119	0.24	0.65	0.96	1.27	2.07	0.40	0.78	0.98	1.21	1.77	0.47	0.80	0.98	1.17	1.64
SEPSIS	133	0.58	0.77	0.92	1.08	1.64	0.56	0.86	1.00	1.13	1.54	0.67	0.88	1.02	1.14	1.53
PROCEDURES																
ANGIOPLASTY	297	0.00	0.50	0.87	1.35	2.60	0.00	0.59	0.91	1.34	2.50	0.00	0.65	0.95	1.31	2.25
CABG	478	0.21	0.68	0.98	1.39	2.40	0.32	0.73	1.00	1.36	2.12	0.38	0.75	1.01	1.31	2.04
PACEMAKER	83	0.00	0.34	0.65	1.04	1.75	0.01	0.54	0.85	1.03	1.70	0.23	0.69	0.87	1.10	1.57
CAROTID ENDARTERECTOMY	69	0.00	0.00	0.60	1.23	3.30	0.00	0.33	0.62	1.09	2.50	0.00	0.44	0.68	1.16	1.87
HIP REPLACEMENT	670	0.00	0.49	0.95	1.40	2.65	0.00	0.66	1.01	1.31	2.15	0.24	0.70	0.96	1.24	1.87
REDUCT. OF HIP FRACTURE	259	0.00	0.61	0.91	1.26	2.16	0.38	0.74	0.96	1.21	1.94	0.44	0.77	0.96	1.16	1.79
PROSTATECTOMY	1619	0.00	0.00	0.78	1.53	3.69	0.00	0.54	0.92	1.39	2.57	0.00	0.61	0.93	1.30	2.21
CHOLECYSTECTOMY	642	0.00	0.50	0.96	1.44	3.04	0.00	0.61	0.96	1.36	2.26	0.25	0.66	0.96	1.27	2.01
HYSTERECTOMY	90	0.00	0.00	0.00	1.57	5.00	0.00	0.00	0.68	1.43	2.83	0.00	0.28	0.67	1.15	2.88

TABLE 5: MULTIPLICATIVE FACTORS FOR THE CALCULATION OF THE BOUNDS FOR PREDICTION INTERVALS

(n is the number of cases at your hospital and p is the predicted mortality rate)

	99% Prediction Interval					95% Prediction Interval					75% Prediction Interval				
	Factor for Upper Bound					Factor for Upper Bound					Factor for Upper Bound				
p	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
n															
25	2.95	2.73	2.68	2.63	2.59	2.15	2.04	2.01	1.99	1.97	1.17	1.16	1.16	1.15	1.15
50	2.76	2.65	2.63	2.60	2.58	2.05	2.00	1.99	1.97	1.96	1.16	1.15	1.15	1.15	1.15
75	2.70	2.63	2.61	2.59	2.58	2.02	1.99	1.98	1.97	1.96	1.16	1.15	1.15	1.15	1.15
100	2.67	2.61	2.60	2.59	2.58	2.01	1.98	1.97	1.97	1.96	1.16	1.15	1.15	1.15	1.15
150	2.64	2.60	2.59	2.59	2.58	1.99	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
200	2.62	2.60	2.59	2.58	2.58	1.98	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
300	2.61	2.59	2.58	2.58	2.58	1.98	1.97	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
400	2.60	2.59	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
500	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
750	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
1000	2.59	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
2000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
5000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
	Factor for Lower Bound					Factor for Lower Bound					Factor for Lower Bound				
p	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
n															
25	-2.21	-2.42	-2.48	-2.52	-2.56	-1.77	-1.88	-1.91	-1.93	-1.95	-1.13	-1.14	-1.14	-1.15	-1.15
50	-2.39	-2.50	-2.53	-2.55	-2.57	-1.87	-1.92	-1.93	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15
75	-2.45	-2.52	-2.54	-2.56	-2.57	-1.90	-1.93	-1.94	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15
100	-2.48	-2.54	-2.55	-2.56	-2.57	-1.91	-1.94	-1.95	-1.95	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
150	-2.51	-2.55	-2.56	-2.57	-2.57	-1.93	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
200	-2.53	-2.56	-2.56	-2.57	-2.57	-1.94	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
300	-2.54	-2.56	-2.57	-2.57	-2.57	-1.94	-1.95	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
400	-2.55	-2.57	-2.57	-2.57	-2.57	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
500	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
750	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
1000	-2.57	-2.57	-2.57	-2.57	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
2000	-2.57	-2.57	-2.57	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
5000	-2.57	-2.58	-2.58	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15

Medicare Hospital Information

AMI PRESBYTERIAN-DENVER HOSPITAL

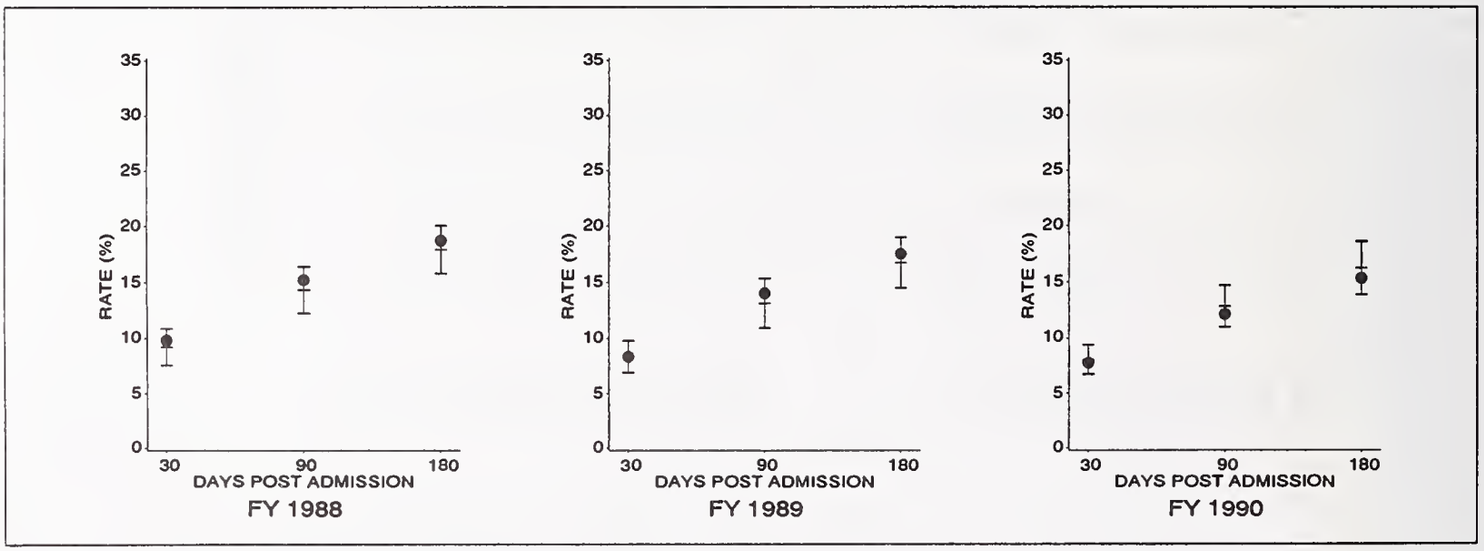
1719 EAST 19TH AVE
DENVER, CO 80218
Medicare Provider Number: 060005

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1921	7.7	8.0	0.7	12.1	12.8	0.9	15.3	16.2	1.2
CONDITIONS:										
Acute Myocardial Infarction	53	22.6	31.6	7.9	32.1	35.1	6.8	35.8	38.0	7.0
Congestive Heart Failure	50	12.0	16.2	-----	30.0	25.8	-----	34.0	32.3	-----
Pneumonia/Influenza	62	11.3	14.1	4.9	12.9	20.3	7.2	16.1	24.3	8.0
Chronic Obstructive Pulmonary Disease	12	8.3	4.5	-----	16.7	8.5	-----	16.7	11.8	-----
Transient Cerebral Ischemia	11	0.0	2.6	-----	9.1	5.5	-----	9.1	8.5	-----
Stroke	32	15.6	17.9	-----	21.9	24.5	-----	25.0	28.4	-----
Hip Fracture	55	12.7	8.3	4.4	14.5	14.8	4.9	18.2	19.3	5.3
Sepsis	25	40.0	25.3	-----	48.0	34.6	-----	52.0	39.5	-----
PROCEDURES:										
Angioplasty	29	0.0	3.6	-----	3.4	4.5	-----	3.4	5.5	-----
Coronary Artery Bypass Graft	64	4.7	6.8	4.0	4.7	9.8	5.1	4.7	11.2	5.6
Initial Pacemaker Insertion	11	0.0	2.4	-----	0.0	4.4	-----	0.0	6.7	-----
Carotid Endarterectomy	8	0.0	1.7	-----	0.0	3.0	-----	0.0	4.3	-----
Hip Replacement/Reconstruction	57	3.5	2.9	3.1	5.3	5.5	3.1	8.8	7.7	3.9
Open Reduction of Hip Fracture	37	8.1	7.4	-----	10.8	13.7	-----	13.5	18.2	-----
Prostatectomy	60	0.0	1.6	1.8	1.7	3.4	2.9	1.7	5.3	3.7
Cholecystectomy	25	8.0	3.4	-----	12.0	6.0	-----	12.0	8.3	-----
Hysterectomy	12	0.0	0.6	-----	0.0	1.5	-----	0.0	2.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



AMI PRESBYTERIAN-DENVER HOSPITAL

Medicare Provider Number: 060005

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	55.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	62.4 %
Transferred from skilled nursing facility	8.4 %
Admitted for elective procedure	31.8 %
Admitted for emergency	10.0 %

COMORBIDITIES:

Cancer	9.2 %
Chronic cardiovascular disease	42.8 %
Chronic liver disease	1.2 %
Chronic renal disease	4.6 %
Chronic pulmonary disease	13.6 %
Cerebrovascular degeneration	3.1 %
Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	43.8%
State	39.8%
Outside State	16.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.0 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1988

PROFILE:

Total Beds	540
Ownership/Control	Private, For Profit
Case Mix Index (CMI)	1.6943

STAFFING:

Medical Residents/Interns	0
Registered Nurses	246
Licensed Practical Nurses	43

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

AMI ST LUKES HOSPITAL

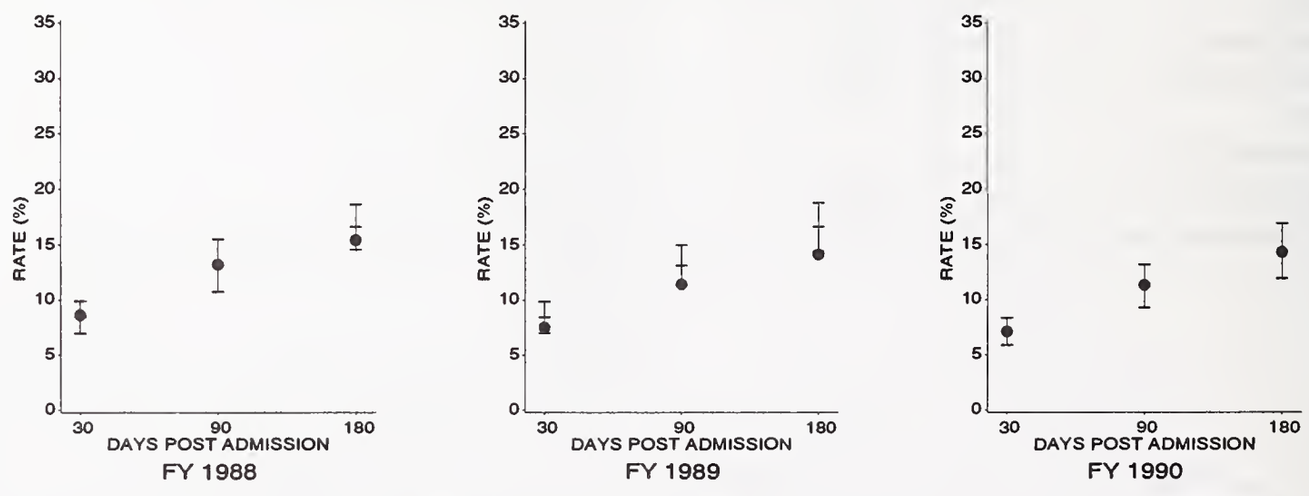
601 E 19TH AVE
DENVER, CO 80203
Medicare Provider Number: 060014

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1699	7.1	7.1	0.6	11.3	11.2	1.0	14.3	14.4	1.2
CONDITIONS:										
Acute Myocardial Infarction	34	26.5	31.9	-----	32.4	35.1	-----	35.3	38.1	-----
Congestive Heart Failure	69	8.7	15.0	7.6	15.9	24.1	9.8	24.6	30.4	9.4
Pneumonia/Influenza	38	10.5	14.3	-----	18.4	19.9	-----	26.3	24.1	-----
Chronic Obstructive Pulmonary Disease	33	18.2	7.1	-----	18.2	12.4	-----	24.2	16.6	-----
Transient Cerebral Ischemia	6	0.0	3.3	-----	0.0	7.3	-----	16.7	11.1	-----
Stroke	32	28.1	18.3	-----	34.4	24.1	-----	34.4	28.2	-----
Hip Fracture	49	12.2	6.4	-----	16.3	11.5	-----	16.3	15.1	-----
Sepsis	7	14.3	18.6	-----	14.3	24.2	-----	28.6	28.5	-----
PROCEDURES:										
Angioplasty	20	0.0	2.7	-----	0.0	3.6	-----	0.0	4.5	-----
Coronary Artery Bypass Graft	37	10.8	6.0	-----	18.9	8.3	-----	24.3	9.2	-----
Initial Pacemaker Insertion	17	0.0	2.4	-----	5.9	4.6	-----	11.8	6.6	-----
Carotid Endarterectomy	4	25.0	0.9	-----	25.0	1.8	-----	25.0	2.8	-----
Hip Replacement/Reconstruction	47	2.1	3.1	-----	4.3	5.5	-----	6.4	7.4	-----
Open Reduction of Hip Fracture	19	5.3	5.4	-----	15.8	10.0	-----	15.8	13.2	-----
Prostatectomy	48	0.0	0.9	-----	2.1	2.0	-----	4.2	3.4	-----
Cholecystectomy	26	7.7	2.3	-----	11.5	4.6	-----	15.4	6.5	-----
Hysterectomy	17	0.0	0.9	-----	5.9	2.0	-----	5.9	3.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



AMI ST LUKES HOSPITAL
Medicare Provider Number: 060014

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.1 years
Proportion female	55.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	64.4 %
Transferred from skilled nursing facility	3.3 %
Admitted for elective procedure	30.3 %
Admitted for emergency	29.0 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	39.8 %
Chronic liver disease	0.8 %
Chronic renal disease	3.9 %
Chronic pulmonary disease	12.2 %
Cerebrovascular degeneration	4.1 %
Diabetes mellitus	6.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	53.2%
State	38.4%
Outside State	8.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	327
Occupancy Rate	62.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	32.3 %
Case Mix Index (CMI)	1.5086

STAFFING:

Total Number of Physicians	219
Percent of Physicians Board Certified Specialists	77.2 %
Medical Residents/Interns	0
Registered Nurses	174
Licensed Practical Nurses	30

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ARKANSAS VALLEY REGIONAL MEDICAL CENTER

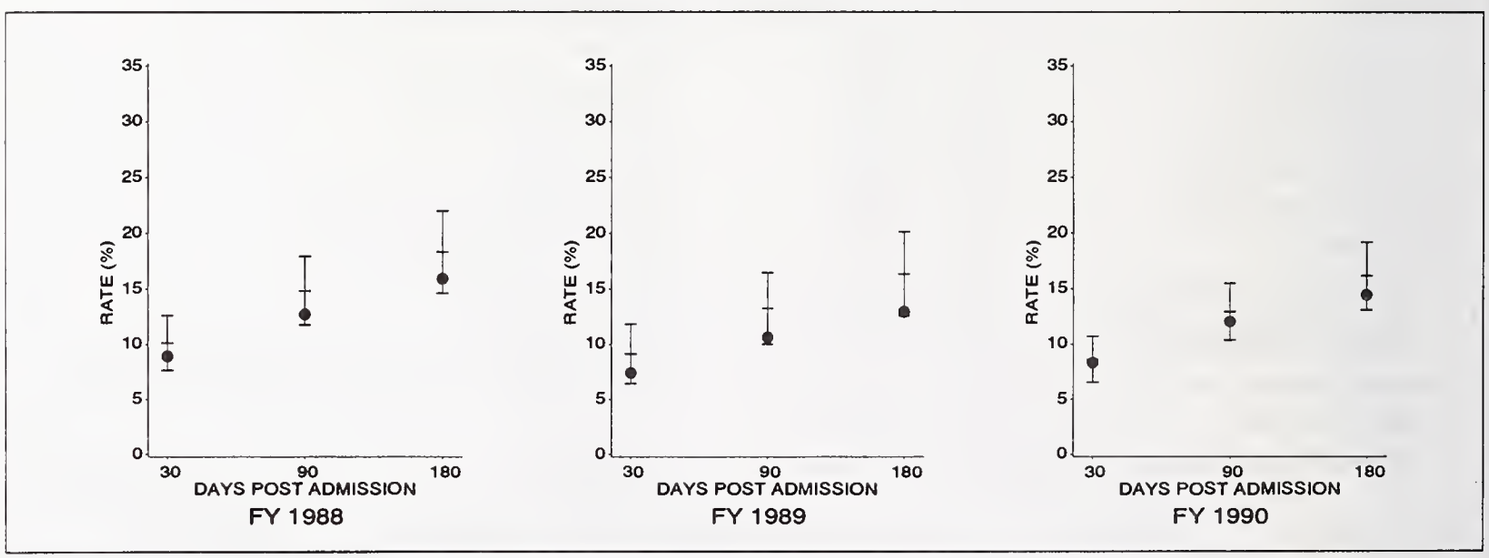
1100 CARSON AVENUE
LA JUNTA, CO 81050
Medicare Provider Number: 060036

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	785	8.3	8.6	1.0	12.0	12.9	1.3	14.4	16.1	1.5
CONDITIONS:										
Acute Myocardial Infarction	30	33.3	21.0	-----	33.3	23.5	-----	33.3	25.9	-----
Congestive Heart Failure	42	7.1	12.8	-----	14.3	20.0	-----	21.4	25.2	-----
Pneumonia/Influenza	48	18.7	12.6	-----	25.0	17.6	-----	25.0	21.0	-----
Chronic Obstructive Pulmonary Disease	26	0.0	8.1	-----	15.4	14.6	-----	26.9	19.5	-----
Transient Cerebral Ischemia	8	0.0	1.1	-----	0.0	2.4	-----	0.0	4.0	-----
Stroke	21	19.0	18.6	-----	19.0	24.6	-----	28.6	28.4	-----
Hip Fracture	28	7.1	6.3	-----	7.1	11.3	-----	7.1	14.9	-----
Sepsis	11	18.2	31.3	-----	18.2	36.9	-----	27.3	40.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	2.3	-----	0.0	4.2	-----	0.0	5.8	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	4	0.0	4.8	-----	0.0	8.9	-----	0.0	12.2	-----
Open Reduction of Hip Fracture	20	10.0	5.9	-----	10.0	11.1	-----	10.0	15.0	-----
Prostatectomy	52	0.0	0.8	-----	0.0	2.0	-----	0.0	3.5	-----
Cholecystectomy	23	4.3	2.6	-----	4.3	4.9	-----	4.3	6.9	-----
Hysterectomy	9	0.0	0.4	-----	0.0	0.9	-----	0.0	1.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ARKANSAS VALLEY REGIONAL MEDICAL CENTER

Medicare Provider Number: 060036

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.7 years
Proportion female	55.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.0 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	0.0 %
Admitted for emergency	1.3 %

COMORBIDITIES:

Cancer	4.3 %
Chronic cardiovascular disease	33.8 %
Chronic liver disease	0.8 %
Chronic renal disease	2.7 %
Chronic pulmonary disease	28.6 %
Cerebrovascular degeneration	1.0 %
Diabetes mellitus	6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	68.8%
State	29.8%
Outside State	1.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	206
Occupancy Rate	84.0 %
Ownership/Control	Church
Medicare Discharges	39.1 %
Case Mix Index (CMI)	1.2180

STAFFING:

Total Number of Physicians	22
Percent of Physicians Board Certified Specialists	63.6 %
Medical Residents/Interns	0
Registered Nurses	54
Licensed Practical Nurses	18

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ASPEN VALLEY HOSPITAL

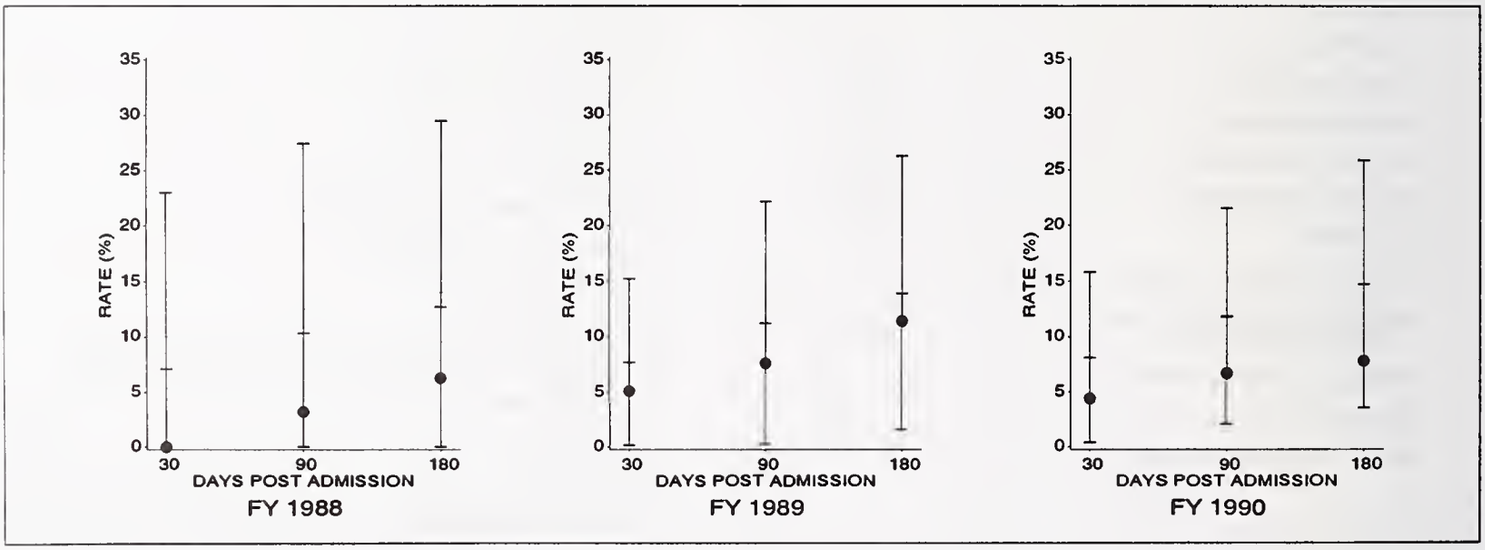
0401 CASTLE CREEK RD
ASPEN, CO 81611
Medicare Provider Number: 060057

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	90	4.4	8.1	3.9	6.7	11.8	4.9	7.8	14.7	5.6
CONDITIONS:										
Acute Myocardial Infarction	3	0.0	32.0	-----	0.0	34.0	-----	0.0	36.2	-----
Congestive Heart Failure	5	20.0	13.4	-----	20.0	21.0	-----	20.0	28.0	-----
Pneumonia/Influenza	4	0.0	8.9	-----	0.0	11.8	-----	25.0	15.3	-----
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	2	0.0	1.6	-----	0.0	3.2	-----	0.0	5.0	-----
Stroke	2	0.0	17.9	-----	0.0	25.7	-----	0.0	29.3	-----
Hip Fracture	1	0.0	7.9	-----	0.0	15.1	-----	0.0	19.4	-----
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	1	0.0	7.1	-----	0.0	13.9	-----	0.0	18.3	-----
Prostatectomy	1	0.0	0.8	-----	0.0	1.6	-----	0.0	2.8	-----
Cholecystectomy	1	0.0	3.9	-----	0.0	5.3	-----	0.0	6.4	-----
Hysterectomy	2	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ASPEN VALLEY HOSPITAL
Medicare Provider Number: 060057

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	53.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	4.4 %
Admitted for emergency	60.0 %

COMORBIDITIES:

Cancer	5.6 %
Chronic cardiovascular disease	50.0 %
Chronic liver disease	2.2 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	10.0 %
Cerebrovascular degeneration	1.1 %
Diabetes mellitus	3.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	40.0%
State	8.3%
Outside State	51.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.1 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	49
Occupancy Rate	24.0 %
Ownership/Control	District/Authority
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.0695

STAFFING:

Total Number of Physicians	21
Percent of Physicians Board Certified Specialists	85.7 %
Medical Residents/Interns	0
Registered Nurses	67
Licensed Practical Nurses	1

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

AVISTA HOSPITAL

100 HEALTH PARK DRIVE
LOUISVILLE, CO 80027
Medicare Provider Number: 060103

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	104	2.9	5.9	3.2	5.8	9.0	3.7	10.6	12.1	3.6
CONDITIONS:										
Acute Myocardial Infarction	3	33.3	22.2	-----	33.3	24.1	-----	33.3	26.5	-----
Congestive Heart Failure	5	20.0	13.4	-----	20.0	20.5	-----	60.0	27.8	-----
Pneumonia/Influenza	1	0.0	1.8	-----	0.0	2.9	-----	0.0	4.4	-----
Chronic Obstructive Pulmonary Disease	3	0.0	8.9	-----	33.3	14.4	-----	33.3	20.0	-----
Transient Cerebral Ischemia	1	0.0	1.5	-----	0.0	3.2	-----	0.0	5.3	-----
Stroke	1	0.0	14.6	-----	0.0	16.2	-----	0.0	18.1	-----
Hip Fracture	3	0.0	5.7	-----	0.0	9.5	-----	0.0	12.8	-----
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	5.2	-----	0.0	8.5	-----	0.0	12.0	-----
Open Reduction of Hip Fracture	2	0.0	4.8	-----	0.0	8.6	-----	0.0	11.8	-----
Prostatectomy	4	0.0	1.0	-----	0.0	2.4	-----	0.0	4.4	-----
Cholecystectomy	4	0.0	1.3	-----	0.0	2.3	-----	0.0	3.2	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation
was not computed for one or more of the three fiscal years,
(1988, 1989, or 1990)

AVISTA HOSPITAL
Medicare Provider Number: 060103

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	55.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	49.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	49.0 %

COMORBIDITIES:

Cancer	4.8 %
Chronic cardiovascular disease	34.6 %
Chronic liver disease	1.0 %
Chronic renal disease	1.0 %
Chronic pulmonary disease	21.2 %
Cerebrovascular degeneration	2.9 %
Diabetes mellitus	3.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.3%
State	4.9%
Outside State	11.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	50
Occupancy Rate	32.0 %
Ownership/Control	Church
Medicare Discharges	31.1 %
Case Mix Index (CMI)	1.2026

STAFFING:

Total Number of Physicians	174
Percent of Physicians Board Certified Specialists	84.5 %
Medical Residents/Interns	0
Registered Nurses	60
Licensed Practical Nurses	2

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

BOULDER COMMUNITY HOSPITAL

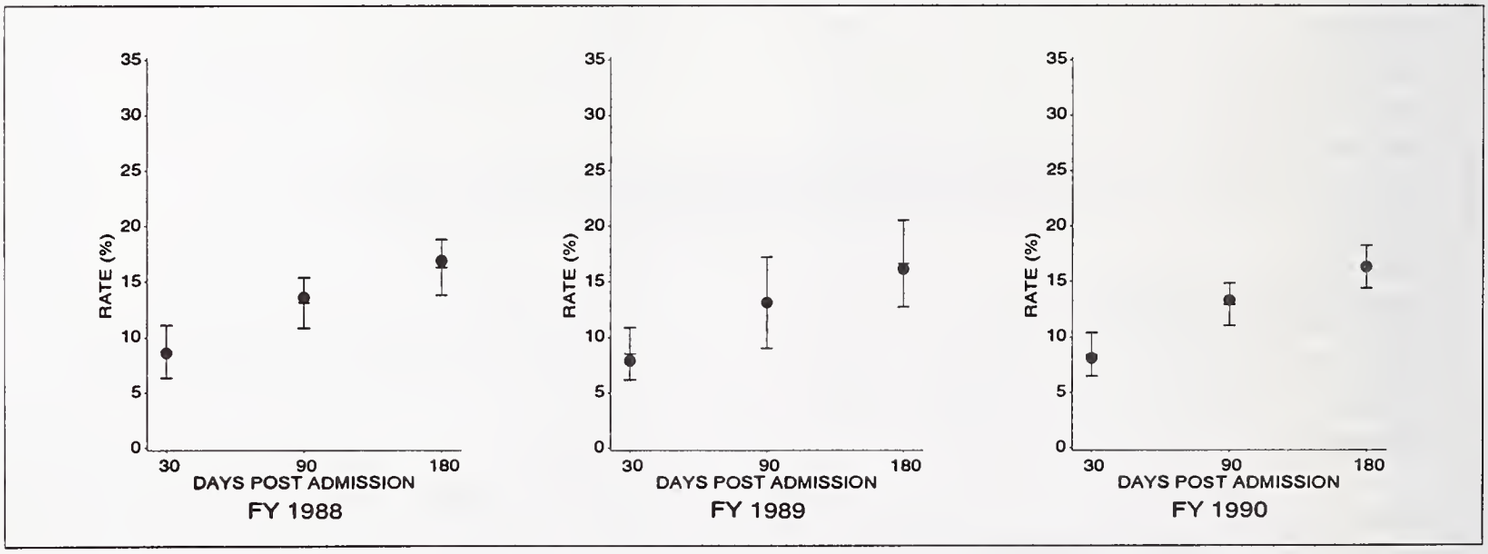
1100 BALSAM AVENUE, BOX 9019
BOULDER, CO 80302
Medicare Provider Number: 060027

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1446	8.1	8.4	1.0	13.3	12.9	1.0	16.3	16.3	1.0
CONDITIONS:										
Acute Myocardial Infarction	55	18.2	28.8	10.2	23.6	31.4	9.4	23.6	33.8	9.3
Congestive Heart Failure	65	18.5	14.6	5.9	29.2	23.1	7.0	33.8	29.2	6.4
Pneumonia/Influenza	85	16.5	13.6	4.1	18.8	19.0	4.5	18.8	22.8	5.1
Chronic Obstructive Pulmonary Disease	42	11.9	6.8	-----	14.3	12.4	-----	19.0	16.9	-----
Transient Cerebral Ischemia	18	5.6	2.1	-----	5.6	4.7	-----	11.1	7.6	-----
Stroke	69	20.3	20.5	4.9	24.6	26.7	6.7	29.0	30.3	7.0
Hip Fracture	45	4.4	5.7	-----	17.8	10.3	-----	22.2	13.8	-----
Sepsis	12	33.3	22.4	-----	41.7	31.9	-----	41.7	37.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	3.7	-----	0.0	7.3	-----	0.0	10.7	-----
Carotid Endarterectomy	3	0.0	0.9	-----	0.0	1.8	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	35	5.7	3.2	-----	11.4	5.8	-----	11.4	7.7	-----
Open Reduction of Hip Fracture	22	4.5	4.7	-----	22.7	8.7	-----	27.3	11.8	-----
Prostatectomy	100	2.0	0.9	1.4	3.0	2.1	1.8	4.0	3.6	2.0
Cholecystectomy	36	2.8	2.0	-----	2.8	3.5	-----	2.8	4.5	-----
Hysterectomy	12	0.0	0.6	-----	0.0	1.5	-----	0.0	2.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BOULDER COMMUNITY HOSPITAL
Medicare Provider Number: 060027

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.8 years
Proportion female	58.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	49.2 %
Transferred from skilled nursing facility	2.2 %
Admitted for elective procedure	14.1 %
Admitted for emergency	8.0 %

COMORBIDITIES:

Cancer	7.7 %
Chronic cardiovascular disease	29.0 %
Chronic liver disease	0.8 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	13.3 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	3.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	87.5%
State	6.1%
Outside State	6.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.0 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	209
Occupancy Rate	59.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.6 %
Case Mix Index (CMI)	1.2944

STAFFING:

Total Number of Physicians	209
Percent of Physicians Board Certified Specialists	80.9 %
Medical Residents/Interns	0
Registered Nurses	275
Licensed Practical Nurses	9

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

CHEYENNE COUNTY HOSPITAL

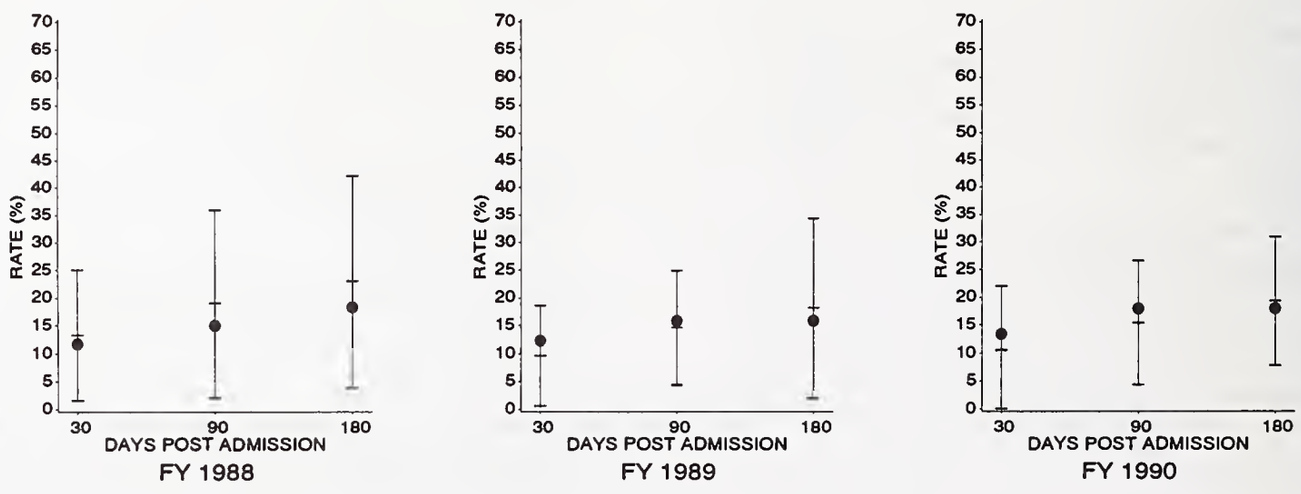
602 W 6TH NORTH
CHEYENNE WELLS, CO 80810
Medicare Provider Number: 060043

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	67	13.4	10.5	5.7	17.9	15.4	5.6	17.9	19.3	5.8
CONDITIONS:										
Acute Myocardial Infarction	3	66.7	38.3	-----	66.7	42.4	-----	66.7	46.1	-----
Congestive Heart Failure	5	0.0	12.4	-----	20.0	20.5	-----	20.0	26.2	-----
Pneumonia/Influenza	7	57.1	18.1	-----	57.1	24.6	-----	57.1	29.4	-----
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	1	0.0	0.8	-----	0.0	2.0	-----	0.0	3.6	-----
Stroke	1	0.0	8.2	-----	0.0	12.7	-----	0.0	14.8	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	1	0.0	2.6	-----	0.0	5.5	-----	0.0	7.3	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CHEYENNE COUNTY HOSPITAL
Medicare Provider Number: 060043

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.5 years
Proportion female	56.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	98.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	58.2 %

COMORBIDITIES:

Cancer	7.5 %
Chronic cardiovascular disease	46.3 %
Chronic liver disease	0.0 %
Chronic renal disease	7.5 %
Chronic pulmonary disease	14.9 %
Cerebrovascular degeneration	10.4 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	66.9%
State	14.8%
Outside State	18.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.1 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	21
Occupancy Rate	19.0 %
Ownership/Control	Local Government
Medicare Discharges	58.8 %
Case Mix Index (CMI)	0.9207

STAFFING:

Total Number of Physicians	1
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	7
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

CLAGETT MEMORIAL HOSPITAL

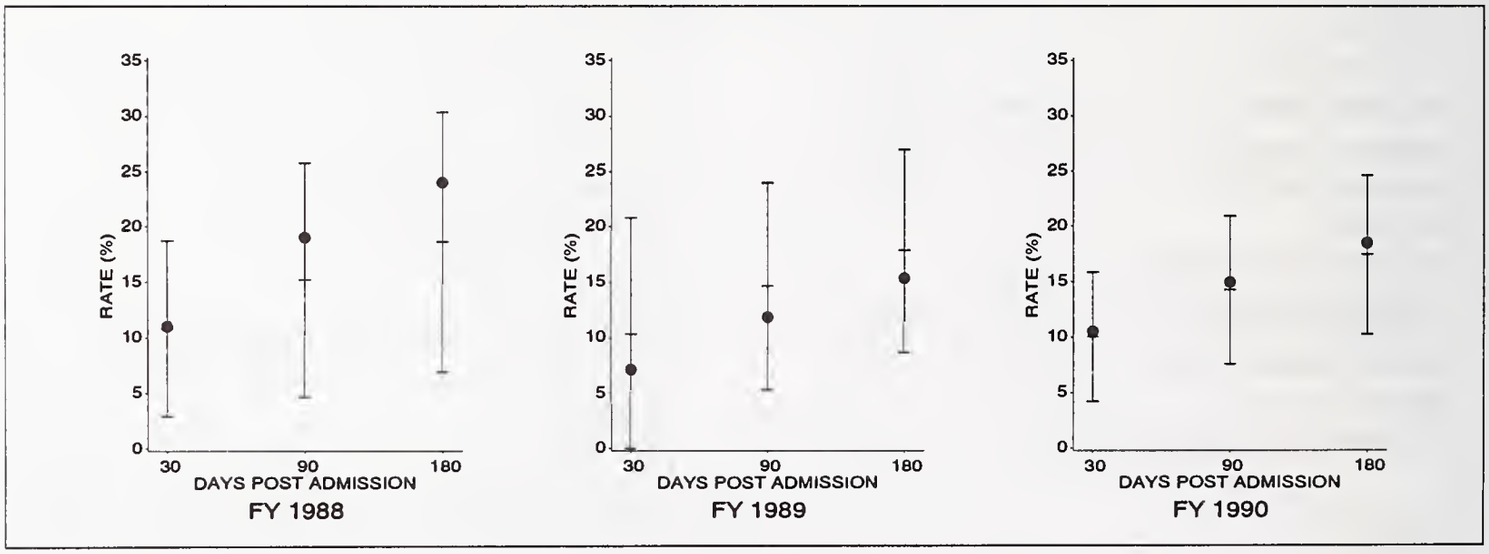
707 EAST FIFTH ST BOX 72
RIFLE, CO 81650
Medicare Provider Number: 060042

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	114	10.5	10.0	2.9	14.9	14.2	3.3	18.4	17.4	3.6
CONDITIONS:										
Acute Myocardial Infarction	6	16.7	25.5	-----	33.3	29.4	-----	33.3	32.5	-----
Congestive Heart Failure	15	20.0	12.7	-----	26.7	19.4	-----	26.7	24.7	-----
Pneumonia/Influenza	13	23.1	14.7	-----	38.5	20.3	-----	46.2	24.6	-----
Chronic Obstructive Pulmonary Disease	1	0.0	9.7	-----	0.0	17.8	-----	0.0	23.5	-----
Transient Cerebral Ischemia	0									
Stroke	3	33.3	32.9	-----	33.3	41.6	-----	66.7	46.6	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	3	0.0	2.4	-----	0.0	4.2	-----	0.0	6.3	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CLAGETT MEMORIAL HOSPITAL
Medicare Provider Number: 060042

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.5 years
Proportion female	57.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	14.0 %
Transferred from skilled nursing facility	0.9 %
Admitted for elective procedure	0.0 %
Admitted for emergency	80.7 %

COMORBIDITIES:

Cancer	1.8 %
Chronic cardiovascular disease	40.4 %
Chronic liver disease	0.9 %
Chronic renal disease	0.9 %
Chronic pulmonary disease	17.5 %
Cerebrovascular degeneration	0.9 %
Diabetes mellitus	0.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.2%
State	6.4%
Outside State	9.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	75
Occupancy Rate	80.0 %
Ownership/Control	District/Authority
Medicare Discharges	42.8 %
Case Mix Index (CMI)	0.9849

STAFFING:

Total Number of Physicians	4
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	13
Licensed Practical Nurses	3

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

COMMUNITY HOSPITAL

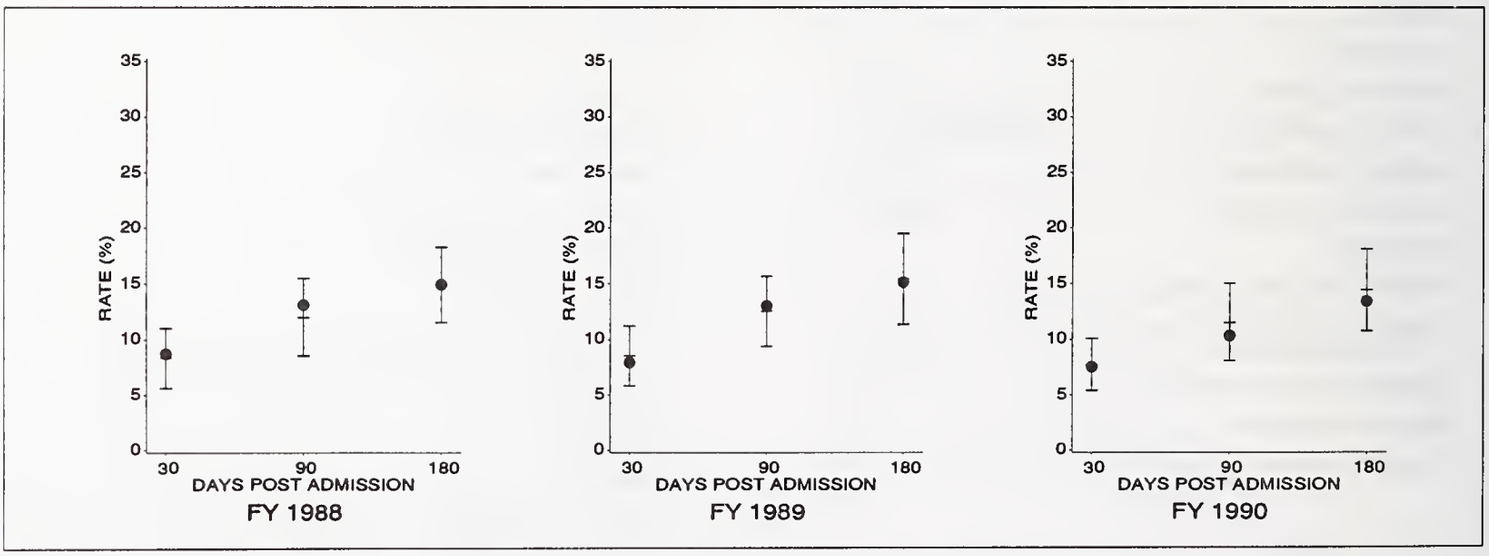
P O BOX 220
GRAND JUNCTION, CO 81501
Medicare Provider Number: 060054

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	536	7.5	7.7	1.2	10.3	11.5	1.7	13.4	14.4	1.8
CONDITIONS:										
Acute Myocardial Infarction	21	33.3	28.5	-----	33.3	30.8	-----	38.1	33.2	-----
Congestive Heart Failure	26	11.5	13.4	-----	11.5	20.1	-----	19.2	25.6	-----
Pneumonia/Influenza	11	18.2	16.9	-----	27.3	23.3	-----	36.4	27.5	-----
Chronic Obstructive Pulmonary Disease	12	0.0	6.6	-----	16.7	12.3	-----	25.0	16.4	-----
Transient Cerebral Ischemia	15	0.0	1.6	-----	0.0	3.5	-----	0.0	5.7	-----
Stroke	13	23.1	18.8	-----	23.1	25.1	-----	23.1	28.8	-----
Hip Fracture	25	0.0	5.5	-----	0.0	9.8	-----	4.0	13.0	-----
Sepsis	5	40.0	28.4	-----	40.0	35.9	-----	60.0	40.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	1.4	-----	0.0	3.2	-----	0.0	5.2	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	12	0.0	4.8	-----	0.0	8.4	-----	0.0	10.9	-----
Open Reduction of Hip Fracture	11	0.0	4.6	-----	0.0	8.4	-----	0.0	11.3	-----
Prostatectomy	31	0.0	0.6	-----	3.2	1.3	-----	3.2	2.2	-----
Choiecystectomy	14	7.1	3.0	-----	7.1	4.8	-----	7.1	5.7	-----
Hysterectomy	9	11.1	0.6	-----	11.1	1.4	-----	11.1	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COMMUNITY HOSPITAL
Medicare Provider Number: 060054

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.2 years
Proportion female	56.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	49.8 %
Transferred from skilled nursing facility	1.9 %
Admitted for elective procedure	31.2 %
Admitted for emergency	30.0 %

COMORBIDITIES:

Cancer	7.5 %
Chronic cardiovascular disease	39.2 %
Chronic liver disease	0.6 %
Chronic renal disease	1.1 %
Chronic pulmonary disease	15.1 %
Cerebrovascular degeneration	6.0 %
Diabetes mellitus	4.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.2%
State	9.5%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	49
Occupancy Rate	48.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.9 %
Case Mix Index (CMI)	1.2046

STAFFING:

Total Number of Physicians	43
Percent of Physicians Board Certified Specialists	62.8 %
Medical Residents/Interns	0
Registered Nurses	62
Licensed Practical Nurses	15

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

CONEJOS COUNTY HOSPITAL

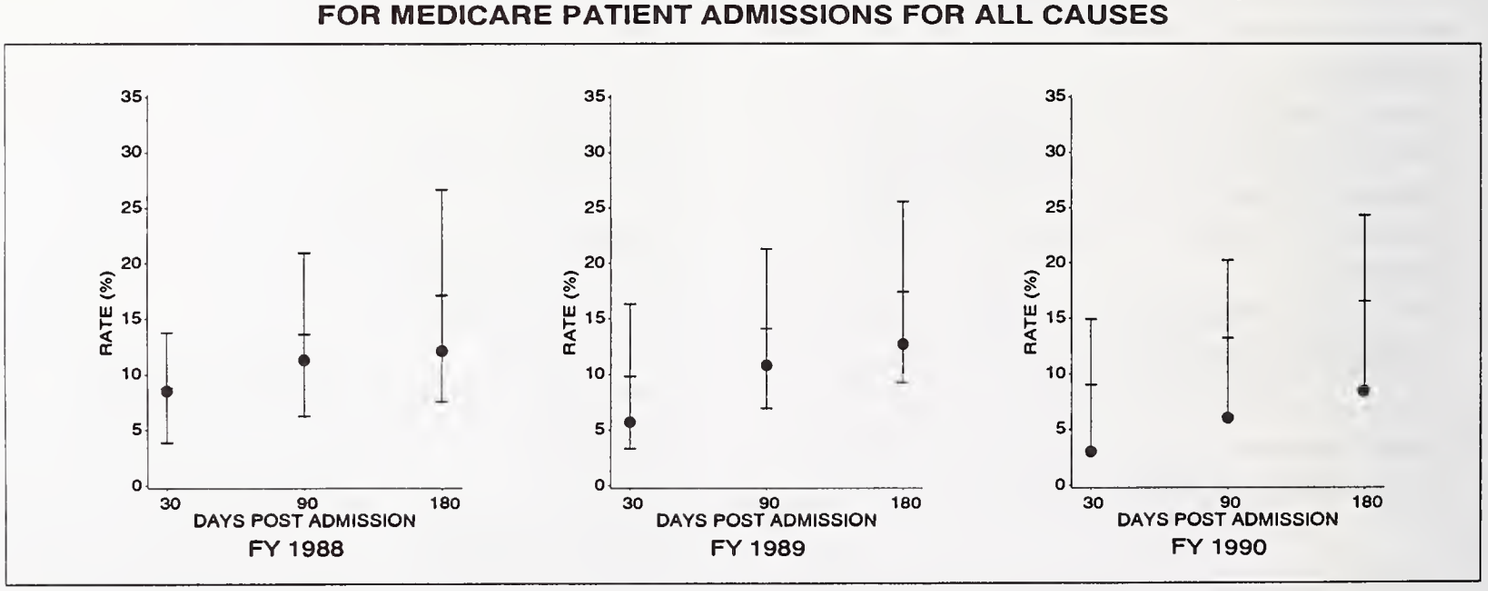
PO BOX 639
LA JARA, CO 81140
Medicare Provider Number: 060060

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	166	3.0	9.0	3.0	6.0	13.2	3.5	8.4	16.5	3.9
CONDITIONS:										
Acute Myocardial Infarction	3	0.0	12.9	-----	0.0	14.6	-----	0.0	16.6	-----
Congestive Heart Failure	6	0.0	13.0	-----	0.0	20.1	-----	0.0	25.9	-----
Pneumonia/Influenza	17	0.0	16.2	-----	11.8	22.3	-----	11.8	26.8	-----
Chronic Obstructive Pulmonary Disease	6	0.0	5.0	-----	0.0	9.1	-----	0.0	13.5	-----
Transient Cerebral Ischemia	0									
Stroke	9	11.1	22.4	-----	11.1	31.5	-----	11.1	37.3	-----
Hip Fracture	1	0.0	5.2	-----	0.0	9.3	-----	0.0	12.7	-----
Sepsis	11	0.0	23.2	-----	0.0	27.7	-----	0.0	31.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	2	0.0	1.5	-----	0.0	4.0	-----	0.0	7.3	-----
Cholecystectomy	5	0.0	2.9	-----	20.0	5.3	-----	20.0	7.1	-----
Hysterectomy	2	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CONEJOS COUNTY HOSPITAL
Medicare Provider Number: 060060

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	54.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	73.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	24.7 %

COMORBIDITIES:

Cancer	3.6 %
Chronic cardiovascular disease	31.3 %
Chronic liver disease	1.2 %
Chronic renal disease	0.6 %
Chronic pulmonary disease	16.9 %
Cerebrovascular degeneration	2.4 %
Diabetes mellitus	17.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.4%
State	22.6%
Outside State	12.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	49
Occupancy Rate	65.0 %
Ownership/Control	District/Authority
Medicare Discharges	36.6 %
Case Mix Index (CMI)	1.0293

STAFFING:

Total Number of Physicians	6
Percent of Physicians Board Certified Specialists	50.0 %
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used In calculating mortality rates**

CRAIG HOSPITAL

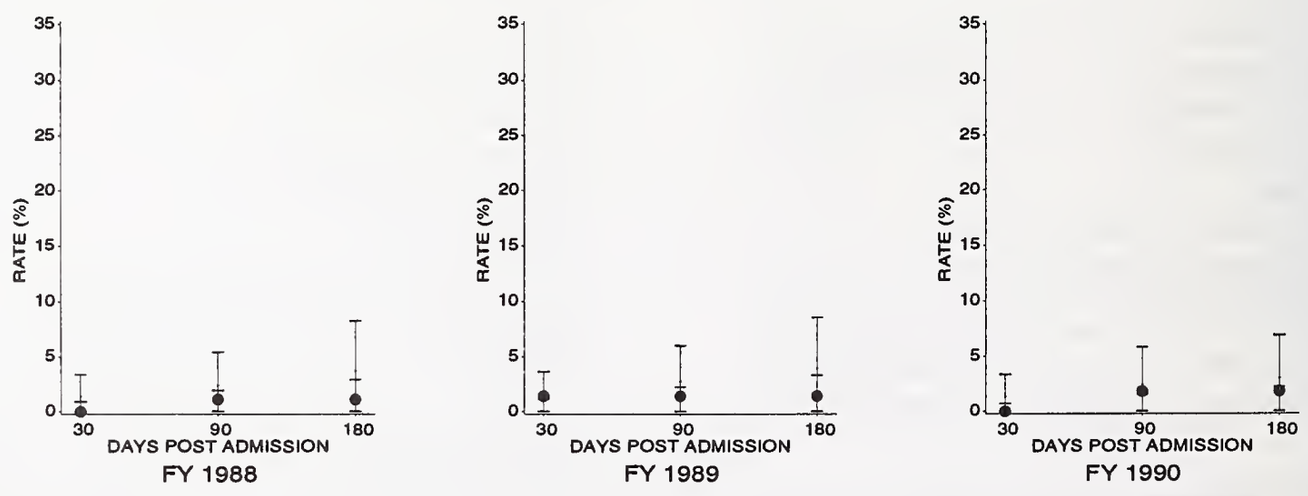
3425 SOUTH CLARKSON
ENGLEWOOD, CO 80110
Medicare Provider Number: 060101

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	55	0.0	0.7	1.3	1.8	1.5	2.2	1.8	2.2	2.3
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	0									
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CRAIG HOSPITAL
Medicare Provider Number: 060101

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	39.7 years
Proportion female	10.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	96.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	100.0 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	0.0 %
Chronic cardiovascular disease	0.0 %
Chronic liver disease	0.0 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	3.6 %
Cerebrovascular degeneration	0.0 %
Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	1.4%
State	33.3%
Outside State	65.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	24.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	80
Occupancy Rate	77.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.9030

STAFFING:

Total Number of Physicians	11
Percent of Physicians Board Certified Specialists	72.7 %
Medical Residents/Interns	0
Registered Nurses	39
Licensed Practical Nurses	16

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

DELTA COUNTY MEMORIAL HOSPITAL

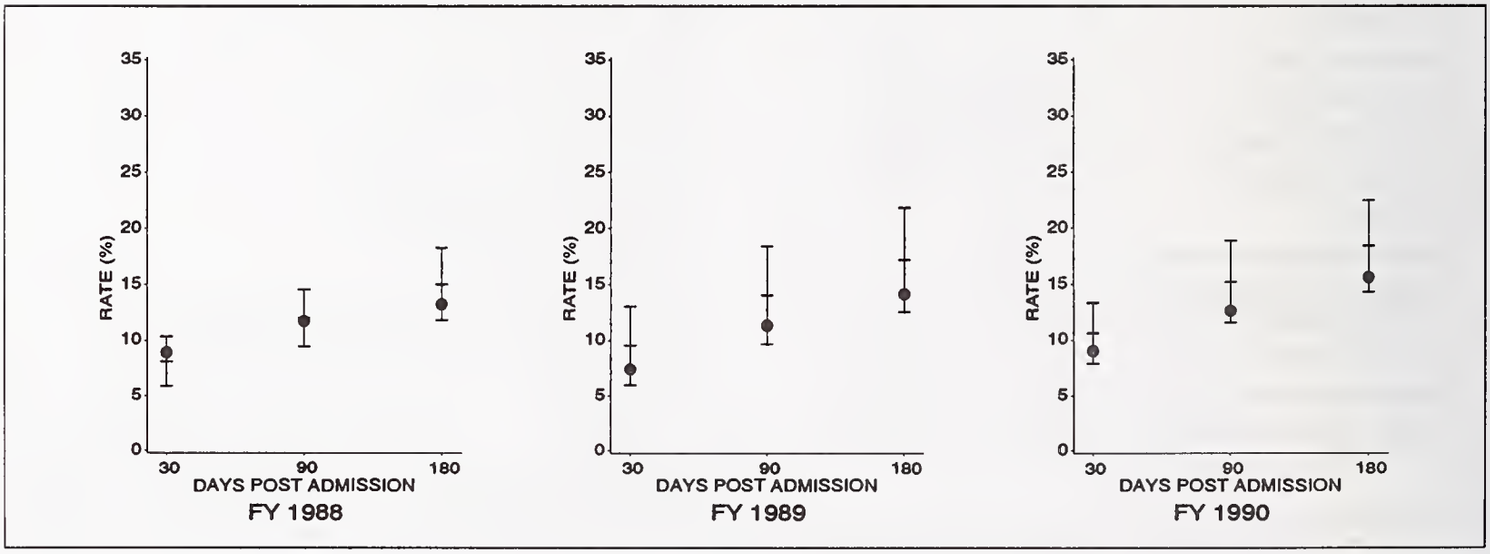
100 STAFFORD LN
DELTA, CO 81416
Medicare Provider Number: 060071

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	643	9.0	10.6	1.4	12.6	15.2	1.8	15.6	18.4	2.1
CONDITIONS:										
Acute Myocardial Infarction	25	32.0	30.3	-----	32.0	33.2	-----	32.0	36.1	-----
Congestive Heart Failure	27	14.8	14.8	-----	18.5	23.0	-----	22.2	28.7	-----
Pneumonia/Influenza	48	18.8	19.1	-----	22.9	26.4	-----	25.0	30.6	-----
Chronic Obstructive Pulmonary Disease	18	0.0	5.3	-----	5.6	9.3	-----	11.1	12.9	-----
Transient Cerebral Ischemia	0									
Stroke	17	5.9	18.0	-----	5.9	24.4	-----	5.9	29.0	-----
Hip Fracture	3	33.3	6.2	-----	33.3	12.3	-----	33.3	16.3	-----
Sepsis	4	25.0	20.9	-----	25.0	28.0	-----	25.0	32.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	12.1	-----	0.0	16.3	-----	0.0	20.0	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	2	50.0	7.2	-----	50.0	14.9	-----	50.0	20.3	-----
Prostatectomy	25	0.0	0.5	-----	0.0	1.2	-----	0.0	2.1	-----
Cholecystectomy	37	5.4	2.8	-----	5.4	5.2	-----	8.1	7.0	-----
Hysterectomy	9	0.0	0.3	-----	0.0	0.6	-----	0.0	0.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DELTA COUNTY MEMORIAL HOSPITAL

Medicare Provider Number: 060071

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.6 years
Proportion female	56.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	30.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	29.4 %
Admitted for emergency	69.7 %

COMORBIDITIES:

Cancer	5.8 %
Chronic cardiovascular disease	34.4 %
Chronic liver disease	0.3 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	17.7 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	6.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	89.2%
State	7.9%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	44
Occupancy Rate	40.0 %
Ownership/Control	District/Authority
Medicare Discharges	51.3 %
Case Mix Index (CMI)	1.1246

STAFFING:

Total Number of Physicians	21
Percent of Physicians Board Certified Specialists	76.2 %
Medical Residents/Interns	0
Registered Nurses	52
Licensed Practical Nurses	13

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

DENVER GENERAL HOSPITAL

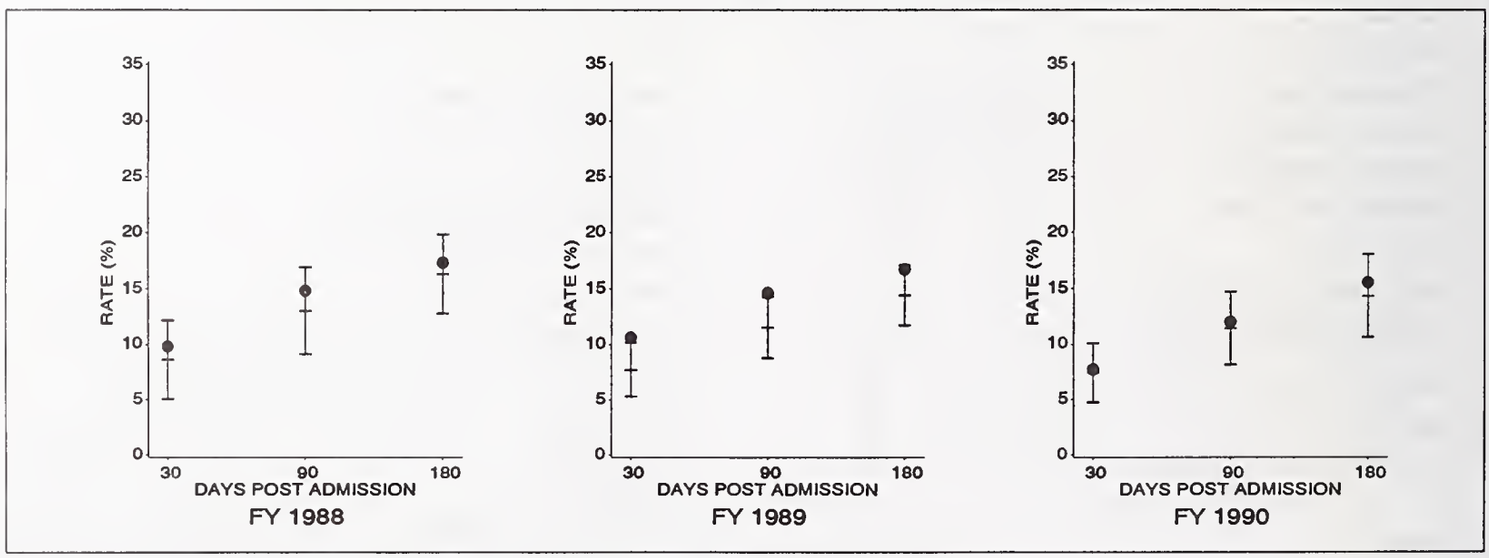
777 BANNOCK
DENVER, CO 80204
Medicare Provider Number: 060011

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	911	7.7	7.4	1.3	12.0	11.4	1.6	15.5	14.3	1.9
CONDITIONS:										
Acute Myocardial Infarction	29	24.1	19.7	-----	34.5	23.1	-----	37.9	26.0	-----
Congestive Heart Failure	40	12.5	13.0	-----	20.0	21.0	-----	32.5	26.7	-----
Pneumonia/Influenza	40	10.0	14.3	-----	20.0	20.2	-----	20.0	23.9	-----
Chronic Obstructive Pulmonary Disease	24	12.5	8.2	-----	12.5	14.7	-----	20.8	19.7	-----
Transient Cerebral Ischemia	11	0.0	2.2	-----	0.0	5.1	-----	0.0	8.2	-----
Stroke	18	16.7	16.0	-----	22.2	20.5	-----	27.8	23.6	-----
Hip Fracture	16	6.3	5.5	-----	25.0	9.8	-----	25.0	13.0	-----
Sepsis	4	25.0	22.7	-----	25.0	28.8	-----	50.0	32.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	1.5	-----	0.0	3.1	-----	0.0	4.6	-----
Carotid Endarterectomy	2	0.0	1.0	-----	0.0	1.9	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	5	0.0	7.2	-----	0.0	13.2	-----	0.0	17.8	-----
Open Reduction of Hip Fracture	6	0.0	3.5	-----	33.3	6.5	-----	33.3	8.9	-----
Prostatectomy	13	0.0	0.5	-----	0.0	1.2	-----	0.0	2.0	-----
Cholecystectomy	11	9.1	3.1	-----	9.1	5.4	-----	9.1	7.1	-----
Hysterectomy	5	0.0	2.7	-----	20.0	5.5	-----	20.0	7.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DENVER GENERAL HOSPITAL
Medicare Provider Number: 060011

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	66.0 years
Proportion female	44.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	4.2 %
Transferred from skilled nursing facility	1.0 %
Admitted for elective procedure	6.8 %
Admitted for emergency	36.9 %

COMORBIDITIES:

Cancer	5.4 %
Chronic cardiovascular disease	22.0 %
Chronic liver disease	2.3 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	12.2 %
Cerebrovascular degeneration	9.2 %
Diabetes mellitus	6.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.9%
State	11.2%
Outside State	3.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.5 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	349
Ownership/Control	Local Government
Case Mix Index (CMI)	1.0989

STAFFING:

Medical Residents/Interns	120
Registered Nurses	270
Licensed Practical Nurses	49

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

DOCTORS HOSPITAL

1920 HIGH ST
DENVER, CO 80218
Medicare Provider Number: 060093

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	10	0.0	5.0	-----	10.0	8.8	-----	10.0	11.4	-----
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	0									
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	1	0.0	11.4	-----	0.0	17.0	-----	0.0	19.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation
was not computed for one or more of the three fiscal years,
(1988, 1989, or 1990)

DOCTORS HOSPITAL
Medicare Provider Number: 060093

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	70.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	100.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	100.0 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	0.0 %
Chronic cardiovascular disease	40.0 %
Chronic liver disease	0.0 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	0.0 %
Cerebrovascular degeneration	10.0 %
Diabetes mellitus	10.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	15.4%
State	53.8%
Outside State	30.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1988

PROFILE:

Total Beds	45
Ownership/Control	Private, For Profit
Case Mix Index (CMI)	0.8704

STAFFING:

Medical Residents/Interns	1
Registered Nurses	14
Licensed Practical Nurses	3

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	No
Hospice Care	No
Intensive Care Unit	No
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

EAST MORGAN COUNTY HOSPITAL

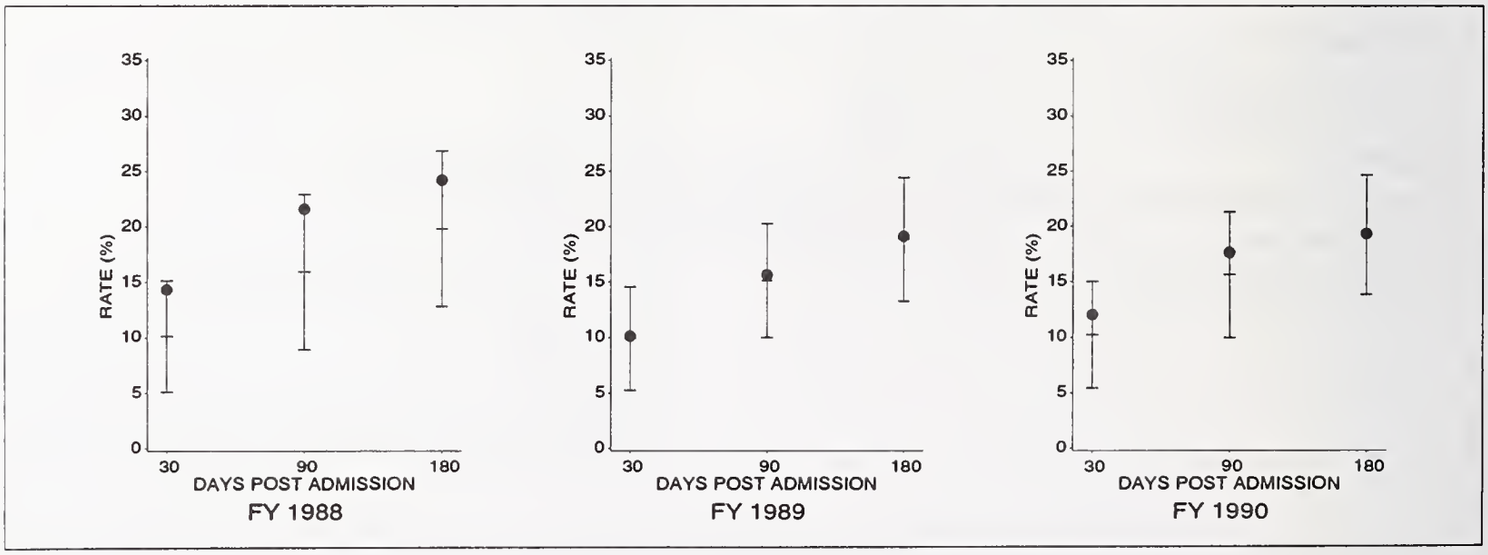
2400 W EDISON
BRUSH, CO 80723
Medicare Provider Number: 060068

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	233	12.0	10.2	2.4	17.6	15.6	2.8	19.3	19.2	2.7
CONDITIONS:										
Acute Myocardial Infarction	5	20.0	22.3	-----	40.0	25.1	-----	40.0	27.9	-----
Congestive Heart Failure	8	12.5	18.2	-----	12.5	27.6	-----	12.5	34.6	-----
Pneumonia/Influenza	23	26.1	17.2	-----	26.1	23.4	-----	26.1	27.2	-----
Chronic Obstructive Pulmonary Disease	7	0.0	7.8	-----	0.0	13.2	-----	0.0	16.9	-----
Transient Cerebral Ischemia	3	33.3	2.0	-----	33.3	4.9	-----	33.3	8.8	-----
Stroke	8	12.5	22.1	-----	25.0	29.7	-----	25.0	33.5	-----
Hip Fracture	9	0.0	8.0	-----	0.0	13.7	-----	0.0	18.0	-----
Sepsis	1	0.0	6.8	-----	0.0	9.9	-----	0.0	12.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	1.0	-----	0.0	2.2	-----	0.0	3.7	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	8	0.0	6.7	-----	0.0	11.7	-----	0.0	15.7	-----
Prostatectomy	8	0.0	0.6	-----	0.0	1.5	-----	0.0	2.8	-----
Cholecystectomy	2	0.0	0.8	-----	0.0	1.6	-----	0.0	2.6	-----
Hysterectomy	6	0.0	0.8	-----	16.7	2.0	-----	16.7	3.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



EAST MORGAN COUNTY HOSPITAL
Medicare Provider Number: 060068

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	78.1 years
Proportion female	55.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.6 %
Transferred from skilled nursing facility	3.8 %
Admitted for elective procedure	12.4 %
Admitted for emergency	3.4 %

COMORBIDITIES:

Cancer	6.0 %
Chronic cardiovascular disease	41.9 %
Chronic liver disease	0.4 %
Chronic renal disease	3.0 %
Chronic pulmonary disease	19.7 %
Cerebrovascular degeneration	4.3 %
Diabetes mellitus	3.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	71.1%
State	27.0%
Outside State	1.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.8 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	29
Occupancy Rate	31.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	61.1 %
Case Mix Index (CMI)	1.1756

STAFFING:

Total Number of Physicians	14
Percent of Physicians Board Certified Specialists	92.9 %
Medical Residents/Interns	0
Registered Nurses	13
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ESTES PARK MEDICAL CENTER

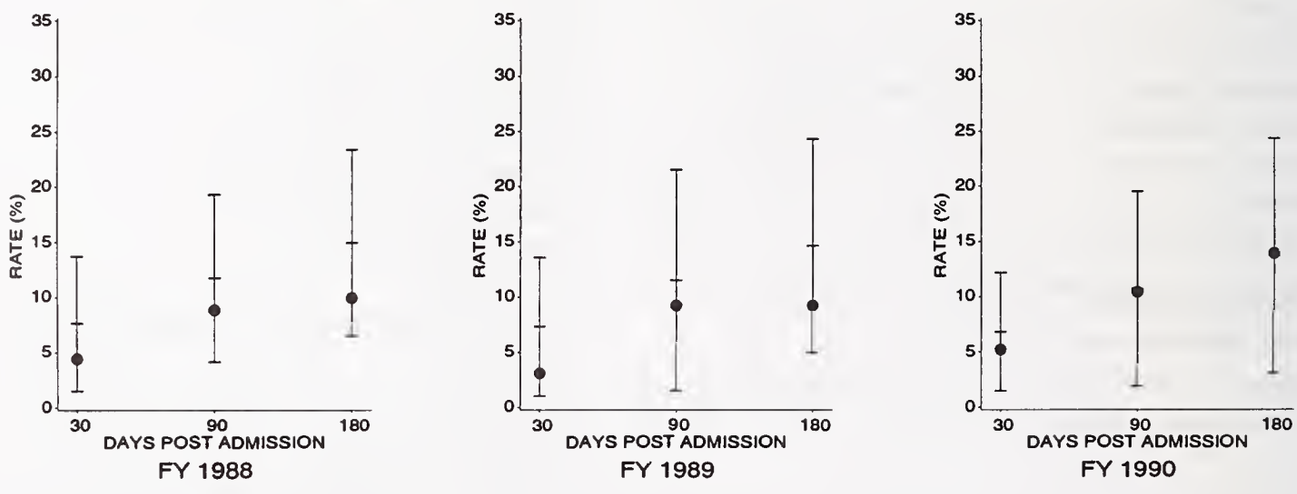
555 PROSPECT
ESTES PARK, CO 80517
Medicare Provider Number: 060088

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	115	5.2	6.8	2.7	10.4	10.7	4.4	13.9	13.7	5.3
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	4	0.0	12.3	-----	0.0	19.1	-----	0.0	25.3	-----
Pneumonia/Influenza	12	16.7	13.8	-----	33.3	18.8	-----	41.7	22.8	-----
Chronic Obstructive Pulmonary Disease	2	0.0	7.4	-----	0.0	12.6	-----	0.0	16.7	-----
Transient Cerebral Ischemia	1	0.0	1.0	-----	0.0	2.6	-----	0.0	4.8	-----
Stroke	2	0.0	16.4	-----	0.0	21.2	-----	0.0	25.9	-----
Hip Fracture	0									
Sepsis	4	0.0	21.6	-----	0.0	34.0	-----	25.0	40.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	2	0.0	0.4	-----	0.0	1.0	-----	0.0	1.9	-----
Cholecystectomy	5	0.0	0.8	-----	0.0	1.6	-----	0.0	2.2	-----
Hysterectomy	1	0.0	3.9	-----	0.0	8.3	-----	0.0	11.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ESTES PARK MEDICAL CENTER
Medicare Provider Number: 060088

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	61.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	97.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	4.3 %
Chronic cardiovascular disease	28.7 %
Chronic liver disease	0.9 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	10.4 %
Cerebrovascular degeneration	0.9 %
Diabetes mellitus	3.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	77.1%
State	5.6%
Outside State	17.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	3.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	70
Occupancy Rate	74.0 %
Ownership/Control	District/Authority
Medicare Discharges	36.4 %
Case Mix Index (CMI)	1.0496

STAFFING:

Total Number of Physicians	6
Percent of Physicians Board Certified Specialists	66.7 %
Medical Residents/Interns	0
Registered Nurses	14
Licensed Practical Nurses	0

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

FAMILY HEALTH WEST

228 NORTH CHERRY ST
FRUITA, CO 81521
Medicare Provider Number: 060063

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	38	18.4	18.2	-----	23.7	27.1	-----	26.3	32.8	-----
CONDITIONS:										
Acute Myocardial Infarction	1	0.0	34.7	-----	0.0	37.7	-----	0.0	41.9	-----
Congestive Heart Failure	1	0.0	5.3	-----	0.0	8.8	-----	0.0	13.6	-----
Pneumonia/Influenza	3	66.7	25.4	-----	66.7	36.3	-----	66.7	41.1	-----
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	1	0.0	7.3	-----	0.0	16.1	-----	0.0	24.8	-----
Stroke	3	33.3	30.2	-----	33.3	46.2	-----	33.3	53.4	-----
Hip Fracture	0									
Sepsis	1	0.0	24.2	-----	0.0	28.0	-----	0.0	32.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

FAMILY HEALTH WEST
Medicare Provider Number: 060063

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	81.5 years
Proportion female	73.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	23.7 %
Transferred from skilled nursing facility	15.8 %
Admitted for elective procedure	0.0 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	13.2 %
Chronic cardiovascular disease	39.5 %
Chronic liver disease	0.0 %
Chronic renal disease	5.3 %
Chronic pulmonary disease	10.5 %
Cerebrovascular degeneration	7.9 %
Diabetes mellitus	13.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	92.0%
State	2.0%
Outside State	6.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	156
Occupancy Rate	94.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.2211

STAFFING:

Total Number of Physicians	11
Percent of Physicians Board Certified Specialists	90.9 %
Medical Residents/Interns	0
Registered Nurses	6
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

FORT MORGAN COMMUNITY HOSPITAL

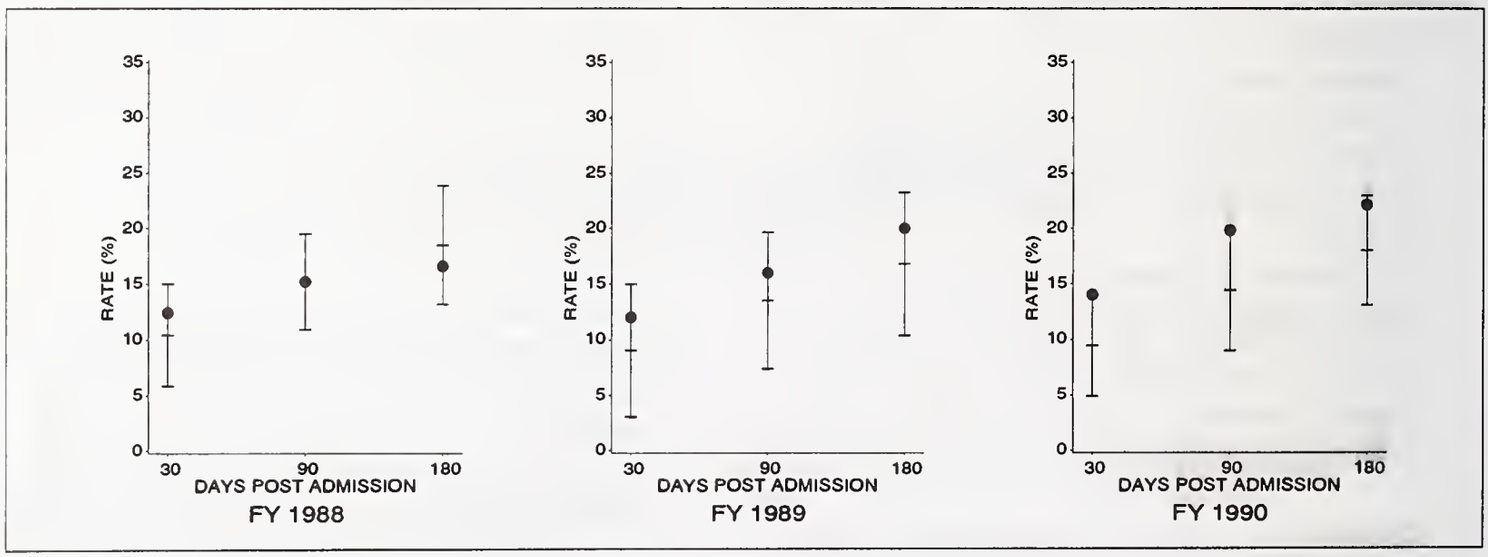
1000 LINCOLN ST
FORT MORGAN, CO 80701
Medicare Provider Number: 060044

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	358	14.0	9.4	2.3	19.8	14.4	2.7	22.1	18.0	2.5
CONDITIONS:										
Acute Myocardial Infarction	10	20.0	22.4	-----	20.0	25.2	-----	20.0	27.7	-----
Congestive Heart Failure	21	14.3	15.3	-----	23.8	24.5	-----	28.6	30.9	-----
Pneumonia/Influenza	16	18.8	11.8	-----	31.3	15.9	-----	31.3	19.2	-----
Chronic Obstructive Pulmonary Disease	23	30.4	7.1	-----	34.8	12.3	-----	34.8	16.4	-----
Transient Cerebral Ischemia	4	0.0	1.0	-----	0.0	2.5	-----	0.0	4.4	-----
Stroke	13	46.2	21.3	-----	61.5	27.3	-----	61.5	31.2	-----
Hip Fracture	16	6.3	7.1	-----	6.3	12.8	-----	6.3	16.9	-----
Sepsis	7	14.3	16.3	-----	14.3	23.9	-----	14.3	29.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	1.9	-----	0.0	3.4	-----	0.0	5.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	3.8	-----	0.0	10.3	-----	0.0	18.3	-----
Open Reduction of Hip Fracture	16	6.3	6.4	-----	6.3	11.9	-----	6.3	16.0	-----
Prostatectomy	0									
Cholecystectomy	7	0.0	2.4	-----	0.0	4.7	-----	14.3	6.3	-----
Hysterectomy	6	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



FORT MORGAN COMMUNITY HOSPITAL
Medicare Provider Number: 060044

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	50.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.4 %
Transferred from skilled nursing facility	2.8 %
Admitted for elective procedure	0.0 %
Admitted for emergency	18.2 %

COMORBIDITIES:

Cancer	5.3 %
Chronic cardiovascular disease	40.8 %
Chronic liver disease	0.6 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	27.1 %
Cerebrovascular degeneration	3.1 %
Diabetes mellitus	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.5%
State	13.5%
Outside State	2.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	40
Occupancy Rate	40.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.7 %
Case Mix Index (CMI)	1.1244

STAFFING:

Total Number of Physicians	85
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	25
Licensed Practical Nurses	12

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

GUNNISON VALLEY HOSPITAL

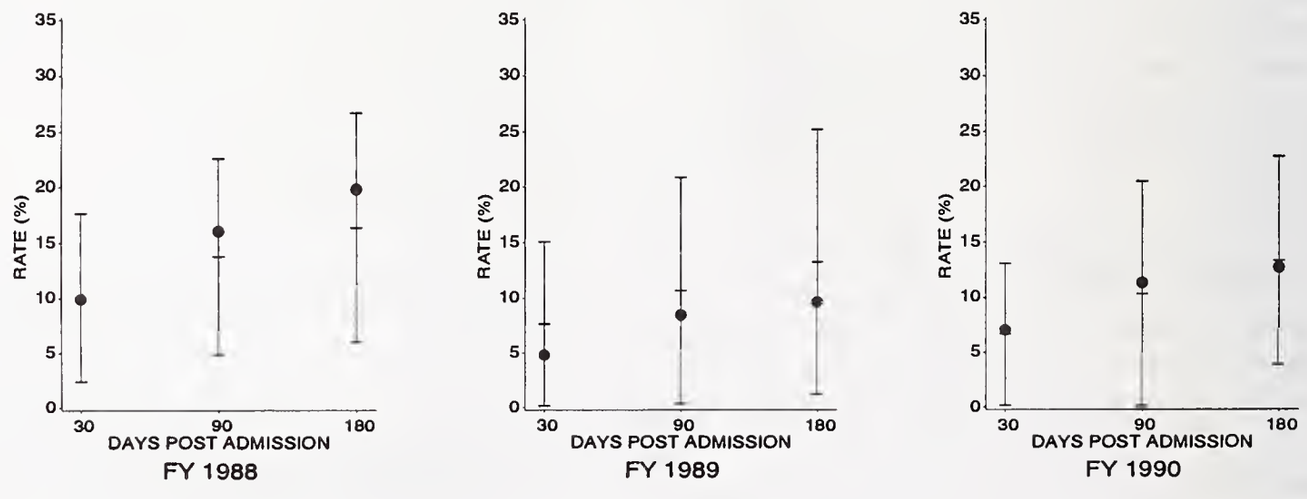
214 EAST DENVER AVE
GUNNISON, CO 81230
Medicare Provider Number: 060070

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	71	7.0	6.6	3.2	11.3	10.3	5.1	12.7	13.3	4.7
CONDITIONS:										
Acute Myocardial Infarction	3	0.0	17.9	-----	0.0	22.0	-----	0.0	25.4	-----
Congestive Heart Failure	2	0.0	11.6	-----	0.0	18.3	-----	0.0	25.4	-----
Pneumonia/Influenza	7	14.3	12.9	-----	14.3	17.9	-----	14.3	21.8	-----
Chronic Obstructive Pulmonary Disease	2	50.0	12.4	-----	50.0	21.7	-----	50.0	27.9	-----
Transient Cerebral Ischemia	2	0.0	0.8	-----	0.0	2.0	-----	0.0	3.6	-----
Stroke	2	0.0	16.3	-----	0.0	20.8	-----	0.0	24.2	-----
Hip Fracture	2	0.0	3.7	-----	0.0	6.3	-----	0.0	7.8	-----
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	0.4	-----	0.0	0.7	-----	0.0	1.1	-----
Open Reduction of Hip Fracture	1	0.0	1.7	-----	0.0	3.2	-----	0.0	4.2	-----
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



GUNNISON VALLEY HOSPITAL
Medicare Provider Number: 060070

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	47.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	53.5 %

COMORBIDITIES:

Cancer	5.6 %
Chronic cardiovascular disease	21.1 %
Chronic liver disease	0.0 %
Chronic renal disease	4.2 %
Chronic pulmonary disease	8.5 %
Cerebrovascular degeneration	2.8 %
Diabetes mellitus	9.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	56.9%
State	12.7%
Outside State	30.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.5 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	24
Occupancy Rate	16.0 %
Ownership/Control	Local Government
Medicare Discharges	17.1 %
Case Mix Index (CMI)	1.0355

STAFFING:

Total Number of Physicians	7
Percent of Physicians Board Certified Specialists	85.7 %
Medical Residents/Interns	0
Registered Nurses	14
Licensed Practical Nurses	3

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

HAXTUN HOSPITAL DISTRICT

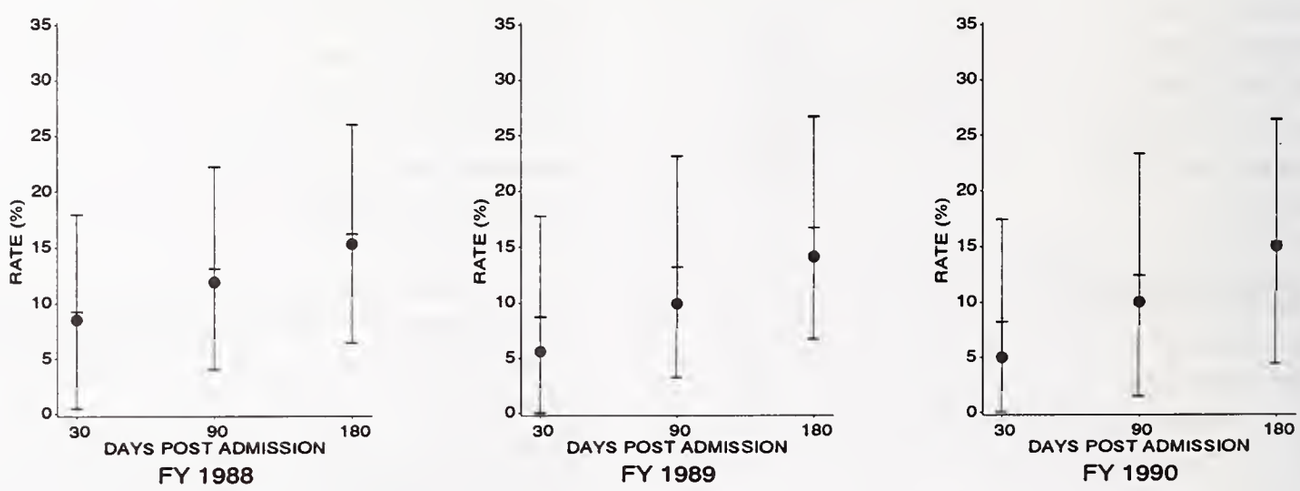
253 W FLETCHER ST
HAXTUN, CO 80731
Medicare Provider Number: 060058

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	60	5.0	8.2	4.6	10.0	12.4	5.5	15.0	15.4	5.5
CONDITIONS:										
Acute Myocardial Infarction	2	0.0	11.2	-----	0.0	12.5	-----	0.0	14.1	-----
Congestive Heart Failure	5	0.0	19.1	-----	0.0	28.9	-----	0.0	35.3	-----
Pneumonia/Influenza	5	0.0	12.4	-----	20.0	16.7	-----	20.0	19.4	-----
Chronic Obstructive Pulmonary Disease	1	100.0	4.8	-----	100.0	8.4	-----	100.0	12.6	-----
Transient Cerebral Ischemia	1	0.0	0.7	-----	0.0	1.7	-----	0.0	3.2	-----
Stroke	2	0.0	16.7	-----	0.0	22.0	-----	50.0	24.8	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HAXTUN HOSPITAL DISTRICT
Medicare Provider Number: 060058

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	63.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	100.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	8.3 %

COMORBIDITIES:

Cancer	3.3 %
Chronic cardiovascular disease	46.7 %
Chronic liver disease	0.0 %
Chronic renal disease	5.0 %
Chronic pulmonary disease	6.7 %
Cerebrovascular degeneration	5.0 %
Diabetes mellitus	3.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.2%
State	17.8%
Outside State	0.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.0 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	48
Occupancy Rate	68.0 %
Ownership/Control	District/Authority
Medicare Discharges	44.2 %
Case Mix Index (CMI)	0.8323

STAFFING:

Total Number of Physicians	2
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	4
Licensed Practical Nurses	2

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

HEART OF THE ROCKIES MEDICAL CENTER

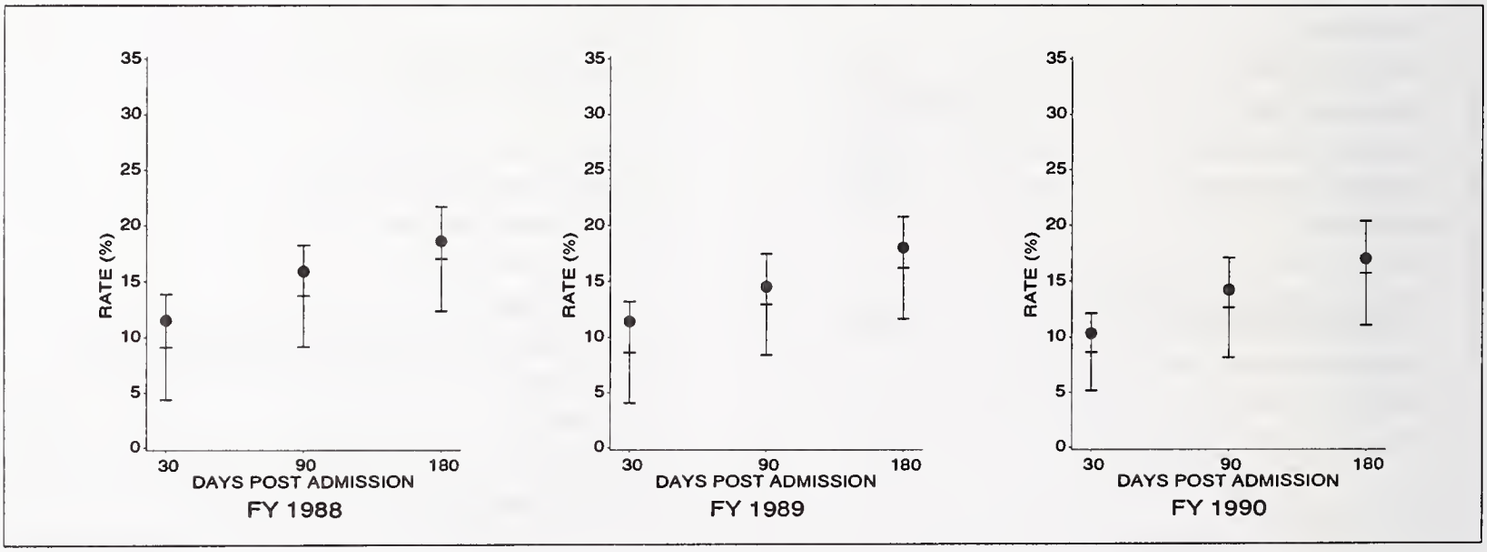
448 E FIRST ST
SALIDA, CO 81201
Medicare Provider Number: 060050

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	330	10.3	8.6	1.7	14.2	12.6	2.2	17.0	15.7	2.3
CONDITIONS:										
Acute Myocardial Infarction	19	26.3	24.8	-----	26.3	27.8	-----	26.3	30.6	-----
Congestive Heart Failure	14	0.0	12.2	-----	0.0	20.4	-----	0.0	25.9	-----
Pneumonia/Influenza	18	5.6	9.8	-----	11.1	13.7	-----	11.1	16.8	-----
Chronic Obstructive Pulmonary Disease	8	12.5	8.5	-----	12.5	14.5	-----	25.0	19.9	-----
Transient Cerebral Ischemia	1	0.0	2.6	-----	0.0	5.9	-----	0.0	10.2	-----
Stroke	12	41.7	21.9	-----	41.7	30.5	-----	41.7	35.9	-----
Hip Fracture	11	18.2	7.6	-----	27.3	13.6	-----	27.3	17.9	-----
Sepsis	3	33.3	12.7	-----	33.3	18.0	-----	33.3	21.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	0.0	7.1	-----	20.0	13.6	-----	20.0	17.9	-----
Open Reduction of Hip Fracture	4	0.0	5.7	-----	0.0	10.2	-----	0.0	13.7	-----
Prostatectomy	11	0.0	1.6	-----	0.0	3.6	-----	0.0	5.7	-----
Cholecystectomy	5	0.0	1.9	-----	0.0	3.5	-----	0.0	4.9	-----
Hysterectomy	3	0.0	2.5	-----	0.0	5.0	-----	0.0	7.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HEART OF THE ROCKIES MEDICAL CENTER

Medicare Provider Number: 060050

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.4 years
Proportion female	53.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	97.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.3 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	6.7 %
Chronic cardiovascular disease	32.4 %
Chronic liver disease	0.3 %
Chronic renal disease	0.6 %
Chronic pulmonary disease	26.1 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	8.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	69.1%
State	24.2%
Outside State	6.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	38
Occupancy Rate	39.0 %
Ownership/Control	District/Authority
Medicare Discharges	38.9 %
Case Mix Index (CMI)	1.0805

STAFFING:

Total Number of Physicians	17
Percent of Physicians Board Certified Specialists	82.4 %
Medical Residents/Interns	0
Registered Nurses	33
Licensed Practical Nurses	13

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

HUERFANO COUNTY MEDICAL CENTER

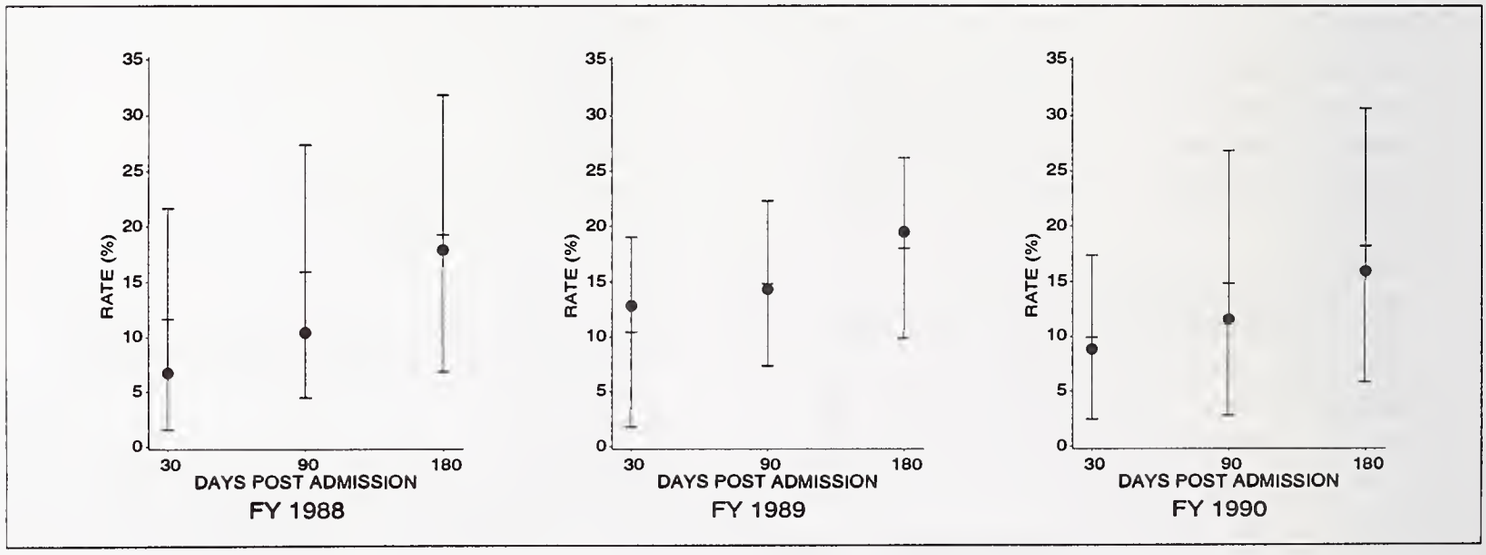
900 E INDIANA AVE
WALSENBURG, CO 81089
Medicare Provider Number: 060066

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	113	8.8	9.9	3.7	11.5	14.8	6.0	15.9	18.2	6.2
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	1	0.0	16.2	-----	0.0	30.3	-----	0.0	40.6	-----
Pneumonia/Influenza	39	10.3	17.1	-----	10.3	23.2	-----	20.5	26.4	-----
Chronic Obstructive Pulmonary Disease	2	50.0	11.7	-----	50.0	19.9	-----	50.0	24.2	-----
Transient Cerebral Ischemia	3	0.0	1.9	-----	0.0	4.2	-----	0.0	6.5	-----
Stroke	2	0.0	22.9	-----	50.0	30.1	-----	50.0	34.1	-----
Hip Fracture	0									
Sepsis	1	0.0	19.4	-----	0.0	23.3	-----	0.0	28.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUERFANO COUNTY MEDICAL CENTER

Medicare Provider Number: 060066

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	78.2 years
Proportion female	55.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	82.3 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	13.3 %

COMORBIDITIES:

Cancer	2.7 %
Chronic cardiovascular disease	47.8 %
Chronic liver disease	0.0 %
Chronic renal disease	4.4 %
Chronic pulmonary disease	11.5 %
Cerebrovascular degeneration	0.9 %
Diabetes mellitus	13.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.1%
State	13.8%
Outside State	3.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	38
Occupancy Rate	65.0 %
Ownership/Control	District/Authority
Medicare Discharges	44.8 %
Case Mix Index (CMI)	0.9437

STAFFING:

Total Number of Physicians	6
Percent of Physicians Board Certified Specialists	66.7 %
Medical Residents/Interns	0
Registered Nurses	6
Licensed Practical Nurses	6

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

HUMANA HOSPITAL AURORA

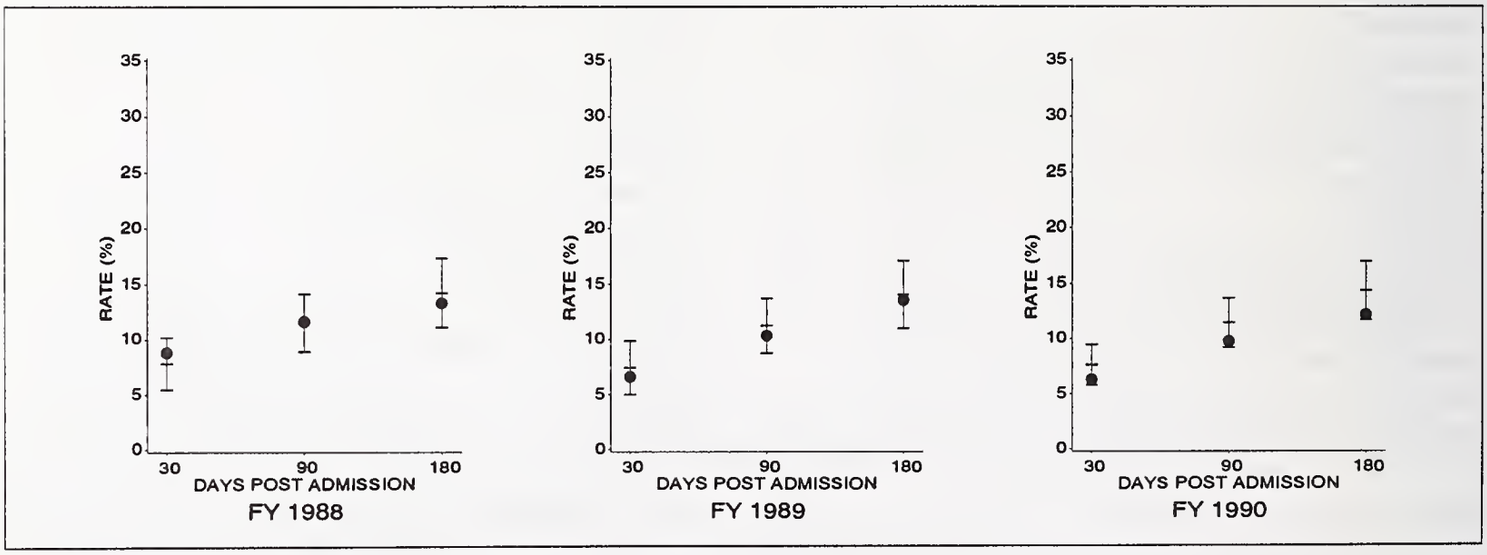
1501 SOUTH POTOMAC
AURORA, CO 80012
Medicare Provider Number: 060087

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1269	6.3	7.6	0.9	9.7	11.4	1.1	12.1	14.3	1.3
CONDITIONS:										
Acute Myocardial Infarction	54	20.4	22.6	6.3	22.2	25.3	6.9	22.2	27.9	8.2
Congestive Heart Failure	51	9.8	14.7	8.4	13.7	23.7	12.6	27.5	29.9	12.5
Pneumonia/Influenza	45	13.3	15.0	-----	15.6	21.1	-----	17.8	24.7	-----
Chronic Obstructive Pulmonary Disease	15	6.7	8.1	-----	6.7	13.2	-----	6.7	17.4	-----
Transient Cerebral Ischemia	17	0.0	1.5	-----	5.9	3.3	-----	5.9	5.2	-----
Stroke	45	11.1	16.9	-----	15.6	23.2	-----	17.8	27.2	-----
Hip Fracture	30	3.3	5.5	-----	10.0	9.9	-----	10.0	13.0	-----
Sepsis	15	20.0	23.0	-----	33.3	29.7	-----	33.3	33.6	-----
PROCEDURES:										
Angioplasty	40	2.5	3.6	-----	2.5	4.4	-----	2.5	5.2	-----
Coronary Artery Bypass Graft	24	8.3	5.9	-----	12.5	8.3	-----	12.5	9.4	-----
Initial Pacemaker Insertion	4	0.0	0.7	-----	0.0	1.8	-----	0.0	2.9	-----
Carotid Endarterectomy	1	0.0	0.7	-----	0.0	1.4	-----	0.0	2.0	-----
Hip Replacement/Reconstruction	35	2.9	2.4	-----	2.9	4.4	-----	5.7	6.0	-----
Open Reduction of Hip Fracture	17	0.0	4.3	-----	11.8	8.4	-----	11.8	11.7	-----
Prostatectomy	41	0.0	0.6	-----	0.0	1.4	-----	2.4	2.4	-----
Cholecystectomy	36	0.0	1.7	-----	0.0	3.1	-----	0.0	4.0	-----
Hysterectomy	4	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUMANA HOSPITAL AURORA
Medicare Provider Number: 060087

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.8 years
Proportion female	58.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	56.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	30.8 %
Admitted for emergency	46.3 %

COMORBIDITIES:

Cancer	3.9 %
Chronic cardiovascular disease	40.3 %
Chronic liver disease	0.6 %
Chronic renal disease	2.9 %
Chronic pulmonary disease	20.4 %
Cerebrovascular degeneration	3.7 %
Diabetes mellitus	6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	30.3%
State	61.3%
Outside State	8.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	200
Occupancy Rate	43.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	27.7 %
Case Mix Index (CMI)	1.4305

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HUMANA HOSPITAL MOUNTAIN VIEW

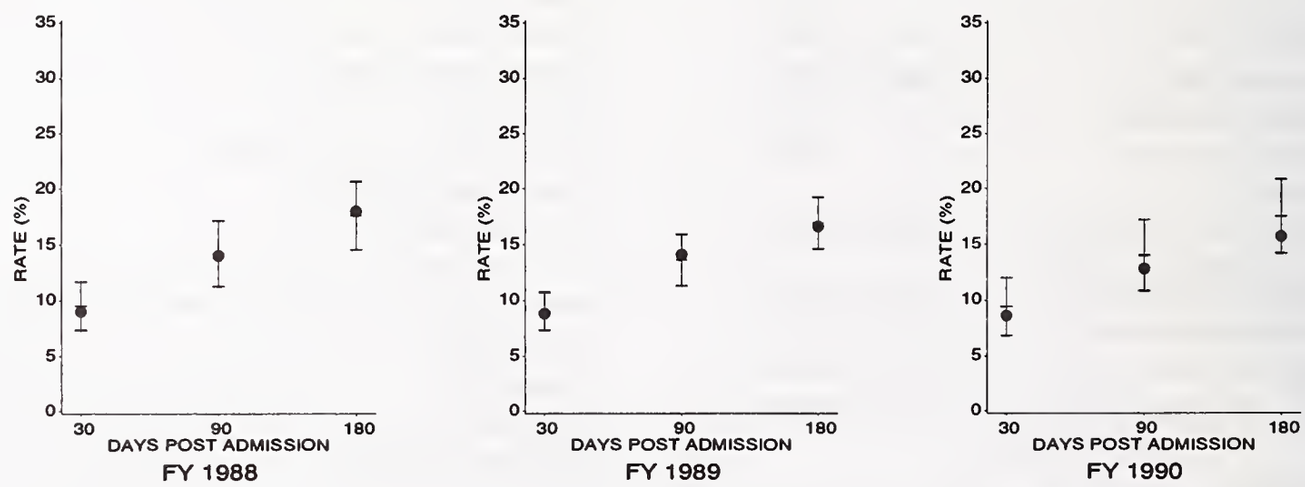
9191 GRANT ST P O BOX 291200
THORNTON, CO 80229
Medicare Provider Number: 060065

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1411	8.6	9.4	1.3	12.8	14.0	1.6	15.7	17.5	1.7
CONDITIONS:										
Acute Myocardial Infarction	27	22.2	22.8	-----	22.2	25.0	-----	22.2	27.4	-----
Congestive Heart Failure	75	12.0	13.9	7.3	18.7	22.1	9.3	25.3	28.3	9.1
Pneumonia/Influenza	80	11.2	13.1	4.3	13.7	18.0	5.8	16.2	21.5	6.1
Chronic Obstructive Pulmonary Disease	20	5.0	5.2	-----	5.0	10.0	-----	15.0	14.0	-----
Transient Cerebral Ischemia	29	0.0	1.3	-----	3.4	2.9	-----	3.4	4.7	-----
Stroke	38	26.3	17.5	-----	28.9	22.1	-----	31.6	25.2	-----
Hip Fracture	36	13.9	8.4	-----	19.4	14.4	-----	19.4	18.2	-----
Sepsis	25	24.0	33.2	-----	32.0	44.0	-----	44.0	49.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	14	7.1	5.1	-----	7.1	9.2	-----	21.4	12.5	-----
Carotid Endarterectomy	1	0.0	1.2	-----	0.0	2.5	-----	0.0	3.6	-----
Hip Replacement/Reconstruction	23	13.0	4.4	-----	17.4	8.0	-----	17.4	10.4	-----
Open Reduction of Hip Fracture	21	14.3	6.7	-----	19.0	11.7	-----	19.0	15.1	-----
Prostatectomy	57	0.0	1.2	1.9	0.0	3.0	3.7	0.0	5.1	5.7
Cholecystectomy	36	2.8	2.8	-----	2.8	5.1	-----	2.8	6.6	-----
Hysterectomy	10	0.0	0.1	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUMANA HOSPITAL MOUNTAIN VIEW

Medicare Provider Number: 060065

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.1 years
Proportion female	58.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.9 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	21.8 %
Admitted for emergency	57.3 %

COMORBIDITIES:

Cancer	6.0 %
Chronic cardiovascular disease	35.9 %
Chronic liver disease	1.3 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	24.8 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	9.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	59.3%
State	36.6%
Outside State	4.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.1 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	180
Occupancy Rate	51.0 %
Ownership/Control	Private, For Profit
Medicare Discharges	36.6 %
Case Mix Index (CMI)	1.3281

STAFFING:

Total Number of Physicians	324
Percent of Physicians Board Certified Specialists	77.8 %
Medical Residents/Interns	0
Registered Nurses	102
Licensed Practical Nurses	21

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

KIT CARSON COUNTY MEMORIAL HOSPITAL

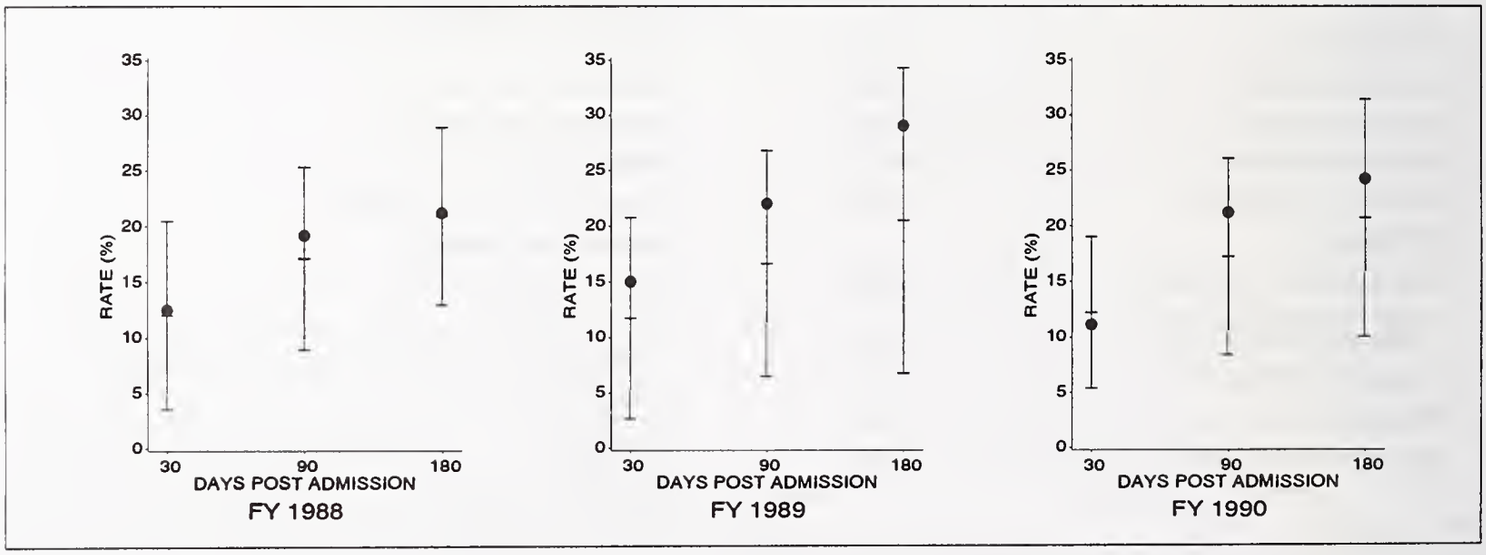
286 16TH ST
BURLINGTON, CO 80807
Medicare Provider Number: 060037

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	99	11.1	12.2	3.4	21.2	17.2	4.4	24.2	20.7	5.3
CONDITIONS:										
Acute Myocardial Infarction	5	20.0	32.1	-----	20.0	35.1	-----	20.0	38.5	-----
Congestive Heart Failure	7	28.6	13.0	-----	42.9	19.9	-----	57.1	25.4	-----
Pneumonia/Influenza	20	20.0	17.1	-----	45.0	23.6	-----	45.0	27.7	-----
Chronic Obstructive Pulmonary Disease	4	0.0	9.1	-----	0.0	15.3	-----	0.0	19.8	-----
Transient Cerebral Ischemia	1	0.0	1.0	-----	0.0	2.2	-----	0.0	3.7	-----
Stroke	1	0.0	13.7	-----	0.0	19.3	-----	0.0	24.3	-----
Hip Fracture	0									
Sepsis	4	0.0	43.7	-----	25.0	52.8	-----	50.0	55.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



KIT CARSON COUNTY MEMORIAL HOSPITAL

Medicare Provider Number: 060037

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.4 years
Proportion female	55.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	19.2 %
Transferred from skilled nursing facility	1.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	74.7 %

COMORBIDITIES:

Cancer	6.1 %
Chronic cardiovascular disease	27.3 %
Chronic liver disease	0.0 %
Chronic renal disease	1.0 %
Chronic pulmonary disease	20.2 %
Cerebrovascular degeneration	6.1 %
Diabetes mellitus	10.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	75.7%
State	10.4%
Outside State	13.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	24
Occupancy Rate	29.0 %
Ownership/Control	Local Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	0.9677

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

KREMMLING MEMORIAL HOSPITAL DISTRICT

212 S 4TH ST
KREMMLING, CO 80459
Medicare Provider Number: 060090

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	25	8.0	7.0	-----	8.0	11.1	-----	12.0	14.2	-----
CONDITIONS:										
Acute Myocardial Infarction	1	0.0	20.9	-----	0.0	23.5	-----	0.0	27.1	-----
Congestive Heart Failure	2	0.0	16.0	-----	0.0	24.3	-----	0.0	30.9	-----
Pneumonia/Influenza	1	0.0	15.4	-----	0.0	21.2	-----	0.0	25.9	-----
Chronic Obstructive Pulmonary Disease	1	0.0	17.2	-----	0.0	26.0	-----	0.0	30.5	-----
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

KREMMLING MEMORIAL HOSPITAL DISTRICT

Medicare Provider Number: 060090

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.8 years
Proportion female	68.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	52.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	8.0 %

COMORBIDITIES:

Cancer	4.0 %
Chronic cardiovascular disease	32.0 %
Chronic liver disease	0.0 %
Chronic renal disease	4.0 %
Chronic pulmonary disease	16.0 %
Cerebrovascular degeneration	0.0 %
Diabetes mellitus	4.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	71.5%
State	19.0%
Outside State	9.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	3.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1991

PROFILE:

Total Beds	21
Ownership/Control	District/Authority
Case Mix Index (CMI)	0.8500

STAFFING:

Medical Residents/Interns	2
Registered Nurses	4
Licensed Practical Nurses	2

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

LAPLATA COMMUNITY HOSPITAL

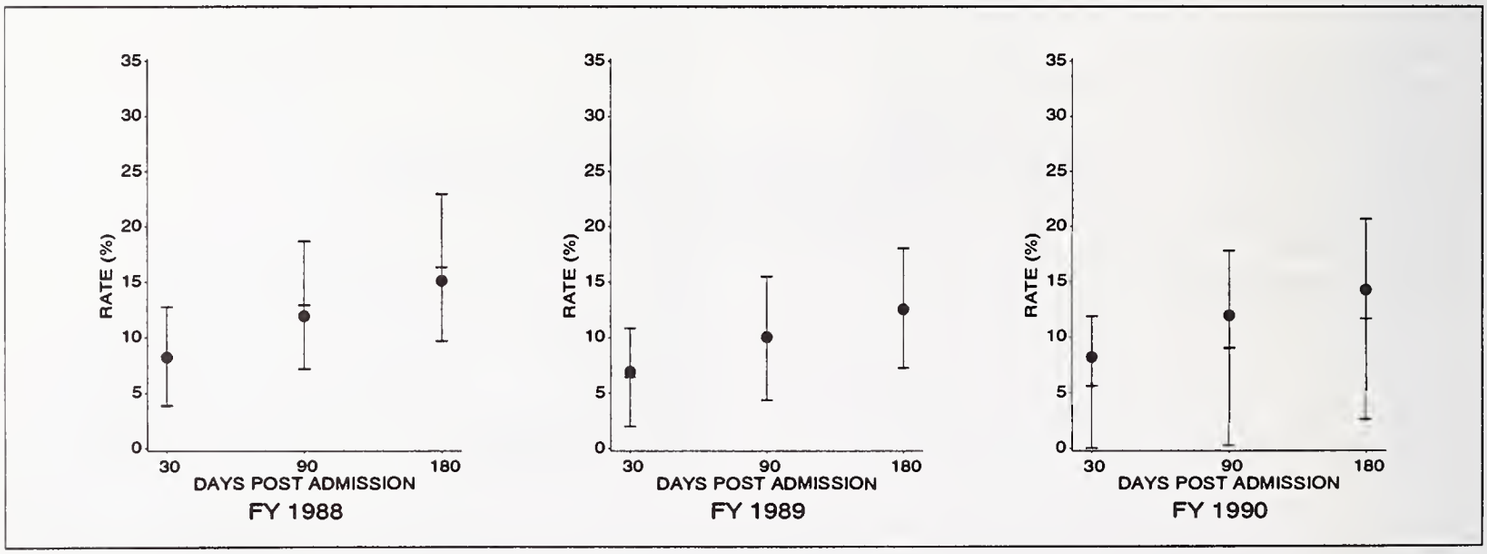
3801 MAIN AVE
DURANGO, CO 81301
Medicare Provider Number: 060039

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	134	8.2	5.6	3.1	11.9	9.0	4.4	14.2	11.6	4.5
CONDITIONS:										
Acute Myocardial Infarction	1	100.0	31.7	-----	100.0	33.9	-----	100.0	36.9	-----
Congestive Heart Failure	4	0.0	10.6	-----	0.0	17.3	-----	25.0	22.3	-----
Pneumonia/Influenza	14	28.6	16.3	-----	28.6	22.9	-----	28.6	27.4	-----
Chronic Obstructive Pulmonary Disease	2	0.0	11.4	-----	0.0	21.0	-----	50.0	26.9	-----
Transient Cerebral Ischemia	0									
Stroke	1	0.0	14.9	-----	0.0	17.0	-----	0.0	19.3	-----
Hip Fracture	0									
Sepsis	1	0.0	12.7	-----	0.0	16.3	-----	0.0	19.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	24	4.2	0.5	-----	4.2	1.3	-----	4.2	2.3	-----
Cholecystectomy	2	0.0	0.9	-----	0.0	1.4	-----	0.0	1.8	-----
Hysterectomy	3	0.0	0.1	-----	0.0	0.1	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LAPLATA COMMUNITY HOSPITAL
Medicare Provider Number: 060039

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.1 years
Proportion female	47.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	82.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	24.6 %
Admitted for emergency	6.7 %

COMORBIDITIES:

Cancer	4.5 %
Chronic cardiovascular disease	14.2 %
Chronic liver disease	0.0 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	11.9 %
Cerebrovascular degeneration	8.2 %
Diabetes mellitus	3.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	67.7%
State	22.6%
Outside State	9.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1987

PROFILE:

Total Beds	55
Ownership/Control	District/Authority
Case Mix Index (CMI)	0.9426

STAFFING:

Medical Residents/Interns	0
Registered Nurses	15
Licensed Practical Nurses	9

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

LINCOLN COMMUNITY HOSPITAL

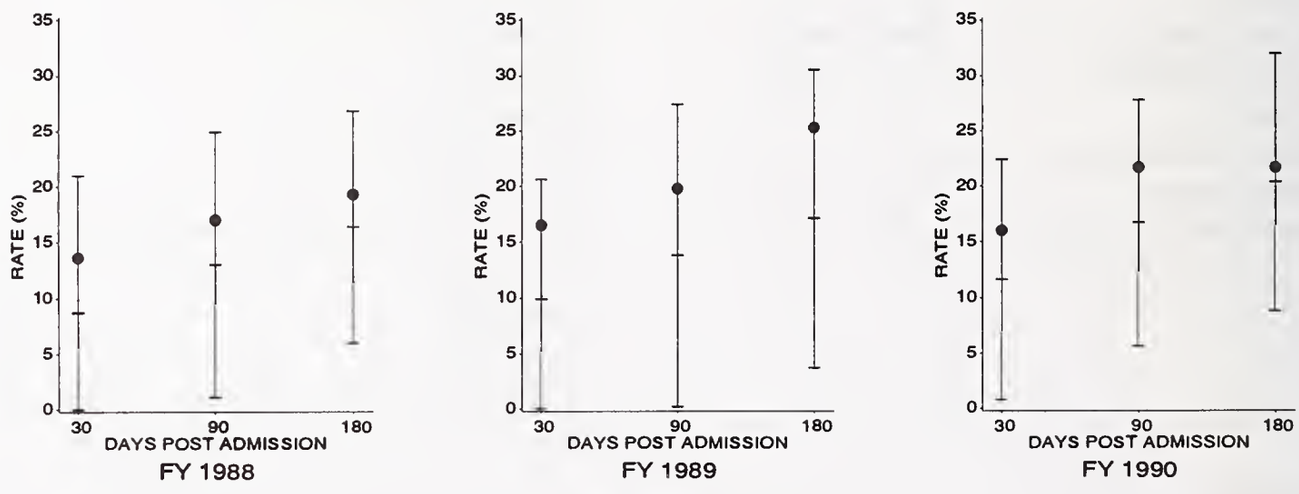
P O BOX 248
HUGO, CO 80821
Medicare Provider Number: 060062

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	106	16.0	11.6	5.4	21.7	16.7	5.6	21.7	20.4	5.8
CONDITIONS:										
Acute Myocardial Infarction	7	14.3	24.4	-----	14.3	27.7	-----	14.3	31.7	-----
Congestive Heart Failure	9	22.2	16.0	-----	33.3	23.1	-----	33.3	28.5	-----
Pneumonia/Influenza	19	21.1	12.3	-----	26.3	17.9	-----	26.3	21.2	-----
Chronic Obstructive Pulmonary Disease	3	0.0	5.6	-----	0.0	10.7	-----	0.0	15.3	-----
Transient Cerebral Ischemia	1	0.0	0.8	-----	0.0	1.9	-----	0.0	3.4	-----
Stroke	7	42.9	21.9	-----	71.4	30.1	-----	71.4	35.5	-----
Hip Fracture	0									
Sepsis	1	0.0	34.8	-----	0.0	42.2	-----	0.0	45.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LINCOLN COMMUNITY HOSPITAL
Medicare Provider Number: 060062

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	78.4 years
Proportion female	54.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	93.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	37.7 %

COMORBIDITIES:

Cancer	6.6 %
Chronic cardiovascular disease	36.8 %
Chronic liver disease	0.0 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	17.9 %
Cerebrovascular degeneration	5.7 %
Diabetes mellitus	3.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	57.3%
State	38.6%
Outside State	4.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	56
Occupancy Rate	64.0 %
Ownership/Control	Local Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	0.9543

STAFFING:

Total Number of Physicians	4
Percent of Physicians Board Certified Specialists	75.0 %
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

LONGMONT UNITED HOSPITAL

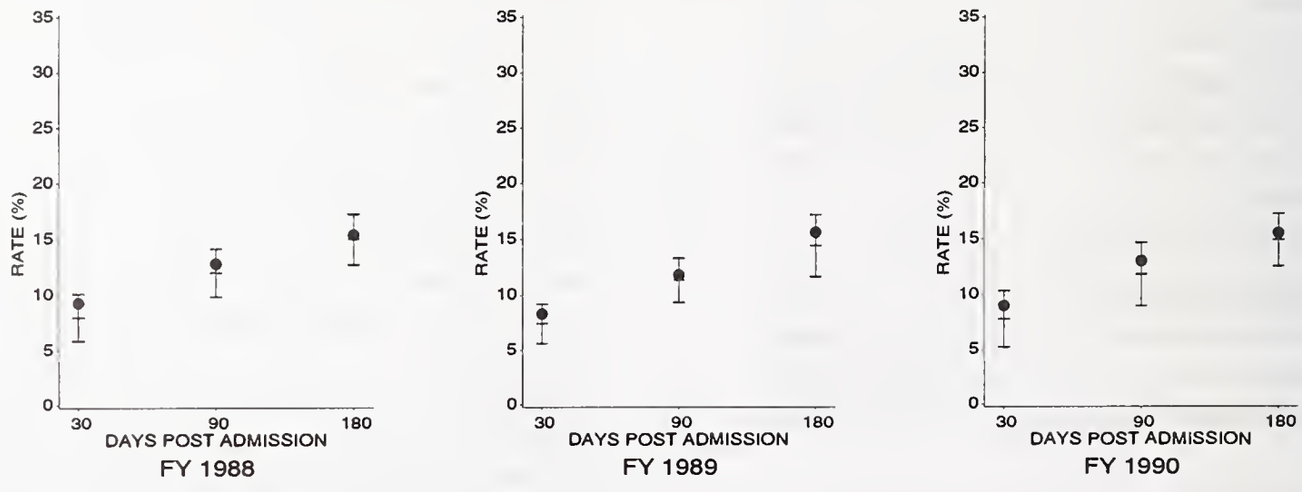
1950 WEST MOUNTAIN VIEW AVE
LONGMONT, CO 80501
Medicare Provider Number: 060003

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1145	9.0	7.8	1.3	13.0	11.8	1.4	15.5	14.9	1.2
CONDITIONS:										
Acute Myocardial Infarction	40	30.0	26.4	-----	35.0	29.2	-----	35.0	31.5	-----
Congestive Heart Failure	49	22.4	13.5	-----	32.7	21.3	-----	36.7	27.4	-----
Pneumonia/Influenza	31	9.7	10.7	-----	12.9	14.8	-----	19.4	17.7	-----
Chronic Obstructive Pulmonary Disease	22	13.6	6.8	-----	27.3	12.5	-----	27.3	17.4	-----
Transient Cerebral Ischemia	17	0.0	1.5	-----	0.0	3.6	-----	0.0	6.1	-----
Stroke	46	15.2	15.3	-----	19.6	21.4	-----	21.7	25.4	-----
Hip Fracture	53	7.5	6.6	3.6	13.2	11.8	4.7	15.1	15.6	7.0
Sepsis	6	0.0	26.0	-----	0.0	31.0	-----	16.7	35.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	7	14.3	5.9	-----	14.3	8.9	-----	14.3	11.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	28	3.6	3.8	-----	7.1	6.8	-----	7.1	9.2	-----
Open Reduction of Hip Fracture	23	4.3	7.2	-----	13.0	13.3	-----	13.0	17.4	-----
Prostatectomy	36	2.8	0.6	-----	5.6	1.5	-----	5.6	2.7	-----
Cholecystectomy	36	2.8	3.1	-----	5.6	6.3	-----	8.3	9.0	-----
Hysterectomy	8	0.0	2.0	-----	0.0	4.7	-----	0.0	7.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LONGMONT UNITED HOSPITAL

Medicare Provider Number: 060003

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	58.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	50.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	34.7 %
Admitted for emergency	45.3 %

COMORBIDITIES:

Cancer	6.2 %
Chronic cardiovascular disease	34.1 %
Chronic liver disease	1.0 %
Chronic renal disease	3.0 %
Chronic pulmonary disease	15.3 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	6.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	80.5%
State	14.6%
Outside State	4.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	128
Occupancy Rate	49.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.1 %
Case Mix Index (CMI)	1.1837

STAFFING:

Total Number of Physicians	82
Percent of Physicians Board Certified Specialists	79.3 %
Medical Residents/Interns	0
Registered Nurses	210
Licensed Practical Nurses	12

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

LUTHERAN HOSPITAL

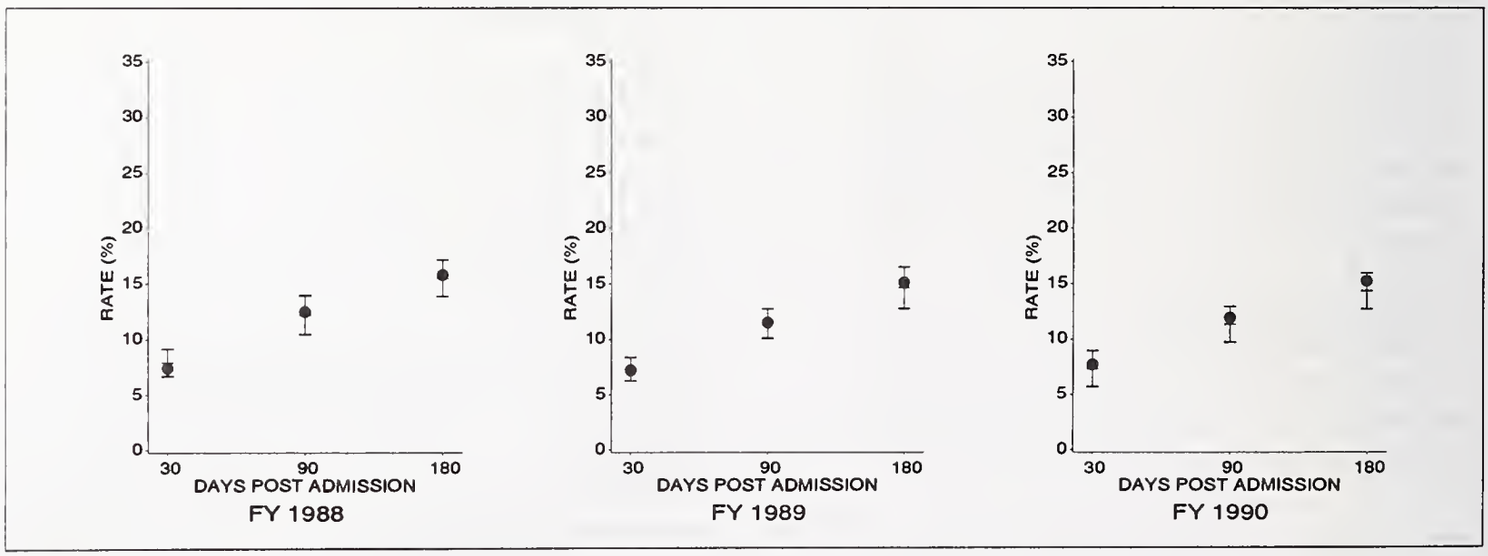
8300 W 38TH AVE
WHEAT RIDGE, CO 80033
Medicare Provider Number: 060009

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3544	7.7	7.3	0.8	11.9	11.3	0.8	15.2	14.3	0.8
CONDITIONS:										
Acute Myocardial Infarction	118	30.5	26.5	4.8	34.7	29.4	5.1	38.1	32.0	5.4
Congestive Heart Failure	113	10.6	14.4	5.5	18.6	22.8	5.1	26.5	29.1	4.6
Pneumonia/Influenza	160	13.7	13.6	2.7	16.2	19.1	3.7	23.1	22.8	3.5
Chronic Obstructive Pulmonary Disease	74	13.5	5.9	4.1	14.9	10.8	4.6	23.0	14.8	5.5
Transient Cerebral Ischemia	33	6.1	1.6	-----	6.1	3.8	-----	6.1	6.2	-----
Stroke	79	19.0	18.8	5.1	24.1	24.4	5.7	27.8	28.3	6.1
Hip Fracture	112	7.1	6.4	2.6	16.1	11.3	3.9	22.3	14.7	4.7
Sepsis	30	10.0	24.1	-----	23.3	31.6	-----	30.0	36.1	-----
PROCEDURES:										
Angioplasty	35	5.7	3.6	-----	5.7	4.4	-----	8.6	5.3	-----
Coronary Artery Bypass Graft	32	6.3	5.1	-----	9.4	7.0	-----	12.5	7.9	-----
Initial Pacemaker Insertion	9	11.1	4.0	-----	11.1	6.7	-----	11.1	9.3	-----
Carotid Endarterectomy	15	0.0	1.6	-----	6.7	3.1	-----	6.7	4.5	-----
Hip Replacement/Reconstruction	104	1.9	2.8	1.9	4.8	5.1	2.4	5.8	6.8	3.0
Open Reduction of Hip Fracture	48	6.3	5.3	-----	16.7	9.9	-----	18.8	13.4	-----
Prostatectomy	159	0.6	0.7	0.7	1.9	1.7	1.2	3.1	3.0	2.1
Cholecystectomy	69	5.8	2.4	3.0	7.2	4.3	3.9	8.7	5.5	4.3
Hysterectomy	41	2.4	0.3	-----	2.4	0.8	-----	2.4	1.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



LUTHERAN HOSPITAL
Medicare Provider Number: 060009

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	58.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	49.9 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	29.2 %
Admitted for emergency	8.5 %

COMORBIDITIES:

Cancer	8.0 %
Chronic cardiovascular disease	31.2 %
Chronic liver disease	0.9 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	16.7 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	5.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	62.2%
State	31.8%
Outside State	6.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	299
Occupancy Rate	70.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	33.3 %
Case Mix Index (CMI)	1.3108

STAFFING:

Total Number of Physicians	276
Percent of Physicians Board Certified Specialists	75.7 %
Medical Residents/Interns	0
Registered Nurses	640
Licensed Practical Nurses	32

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

MCKEE MEDICAL CENTER

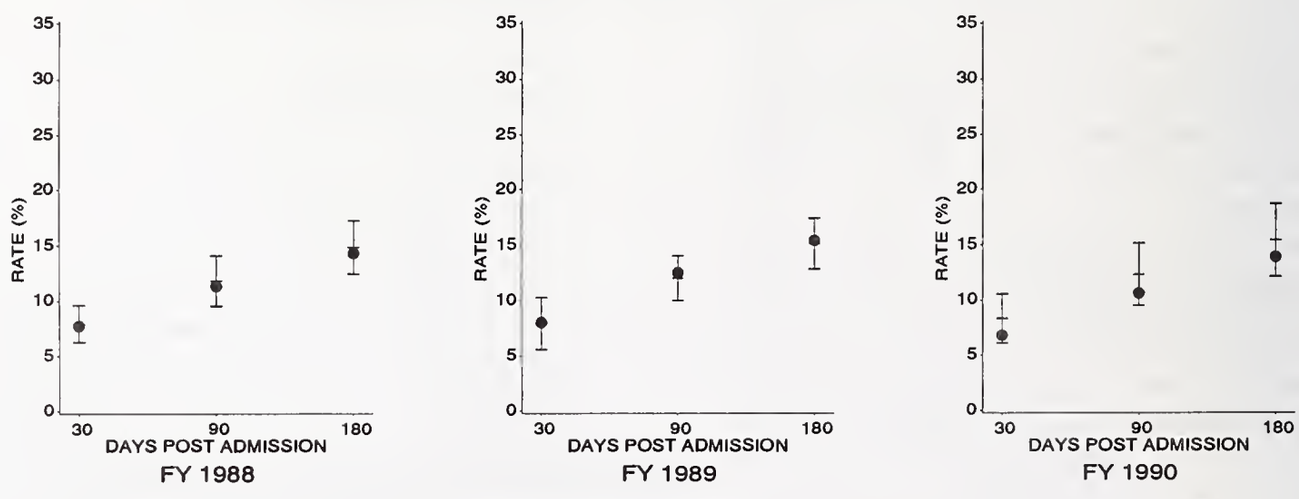
2000 BOISE AVE
LOVELAND, CO 80538
Medicare Provider Number: 060030

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1213	6.8	8.3	1.1	10.6	12.3	1.4	13.9	15.4	1.6
CONDITIONS:										
Acute Myocardial Infarction	59	22.0	22.1	5.7	23.7	25.0	6.5	30.5	27.6	7.0
Congestive Heart Failure	44	13.6	13.8	-----	25.0	22.0	-----	31.8	28.3	-----
Pneumonia/Influenza	82	17.1	13.9	5.3	20.7	19.3	4.5	24.4	22.9	4.9
Chronic Obstructive Pulmonary Disease	23	4.3	8.6	-----	13.0	15.3	-----	26.1	20.5	-----
Transient Cerebral Ischemia	17	0.0	1.3	-----	0.0	2.9	-----	0.0	4.8	-----
Stroke	36	8.3	18.1	-----	19.4	24.1	-----	22.2	28.1	-----
Hip Fracture	38	0.0	5.7	-----	5.3	10.2	-----	7.9	13.4	-----
Sepsis	28	28.6	28.0	-----	28.6	35.6	-----	32.1	39.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	6	0.0	1.7	-----	0.0	3.5	-----	0.0	5.2	-----
Carotid Endarterectomy	4	0.0	0.5	-----	0.0	1.0	-----	0.0	1.7	-----
Hip Replacement/Reconstruction	31	0.0	2.5	-----	0.0	4.5	-----	0.0	5.9	-----
Open Reduction of Hip Fracture	21	0.0	5.4	-----	9.5	10.3	-----	9.5	13.9	-----
Prostatectomy	74	0.0	0.9	1.2	0.0	2.2	2.1	1.4	3.9	2.6
Cholecystectomy	31	0.0	3.8	-----	0.0	6.7	-----	3.2	8.7	-----
Hysterectomy	15	0.0	0.1	-----	0.0	0.4	-----	6.7	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MCKEE MEDICAL CENTER
Medicare Provider Number: 060030

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	54.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	58.9 %
Transferred from skilled nursing facility	0.7 %
Admitted for elective procedure	24.6 %
Admitted for emergency	2.5 %

COMORBIDITIES:

Cancer	6.3 %
Chronic cardiovascular disease	29.7 %
Chronic liver disease	0.8 %
Chronic renal disease	2.1 %
Chronic pulmonary disease	16.1 %
Cerebrovascular degeneration	2.8 %
Diabetes mellitus	6.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.8%
State	6.5%
Outside State	4.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	104
Occupancy Rate	55.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	40.4 %
Case Mix Index (CMI)	1.3256

STAFFING:

Total Number of Physicians	64
Percent of Physicians Board Certified Specialists	82.8 %
Medical Residents/Interns	0
Registered Nurses	133
Licensed Practical Nurses	22

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

MELISSA MEMORIAL HOSPITAL

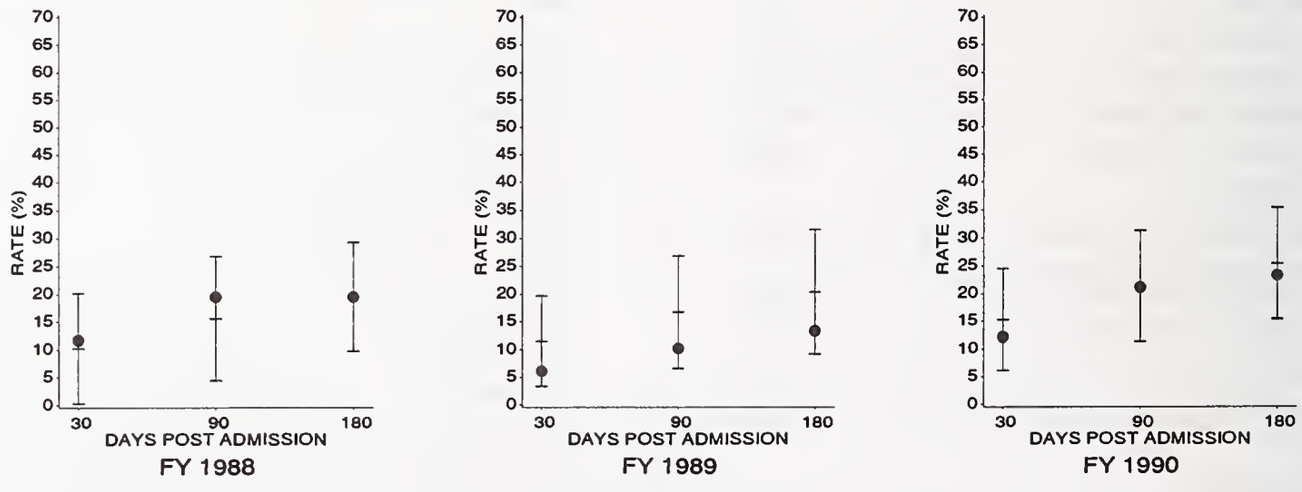
505 SOUTH BAXTER
HOLYOKE, CO 80734
Medicare Provider Number: 060038

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	90	12.2	15.3	4.6	21.1	21.3	5.0	23.3	25.4	5.0
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	12	0.0	17.6	-----	33.3	27.9	-----	33.3	34.6	-----
Pneumonia/Influenza	8	25.0	21.8	-----	37.5	28.6	-----	37.5	32.7	-----
Chronic Obstructive Pulmonary Disease	2	0.0	8.7	-----	50.0	16.8	-----	50.0	22.2	-----
Transient Cerebral Ischemia	2	0.0	2.5	-----	0.0	5.4	-----	0.0	9.1	-----
Stroke	4	25.0	34.8	-----	50.0	42.6	-----	50.0	47.2	-----
Hip Fracture	3	0.0	9.7	-----	0.0	17.2	-----	0.0	21.8	-----
Sepsis	7	28.6	35.6	-----	28.6	40.8	-----	42.9	45.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	11.7	-----	0.0	17.2	-----	0.0	20.8	-----
Open Reduction of Hip Fracture	1	0.0	15.0	-----	0.0	30.0	-----	0.0	39.2	-----
Prostatectomy	2	0.0	1.0	-----	0.0	2.2	-----	0.0	3.9	-----
Cholecystectomy	1	0.0	0.8	-----	0.0	1.6	-----	0.0	2.6	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MELISSA MEMORIAL HOSPITAL
Medicare Provider Number: 060038

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	80.3 years
Proportion female	63.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	25.6 %
Transferred from skilled nursing facility	1.1 %
Admitted for elective procedure	1.1 %
Admitted for emergency	65.6 %

COMORBIDITIES:

Cancer	2.2 %
Chronic cardiovascular disease	50.0 %
Chronic liver disease	0.0 %
Chronic renal disease	7.8 %
Chronic pulmonary disease	18.9 %
Cerebrovascular degeneration	2.2 %
Diabetes mellitus	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	86.9%
State	5.9%
Outside State	7.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.8 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	18
Occupancy Rate	22.0 %
Ownership/Control	District/Authority
Medicare Discharges	58.4 %
Case Mix Index (CMI)	1.1267

STAFFING:

Total Number of Physicians	2
Percent of Physicians Board Certified Specialists	50.0 %
Medical Residents/Interns	0
Registered Nurses	9
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

MEMORIAL HOSPITAL

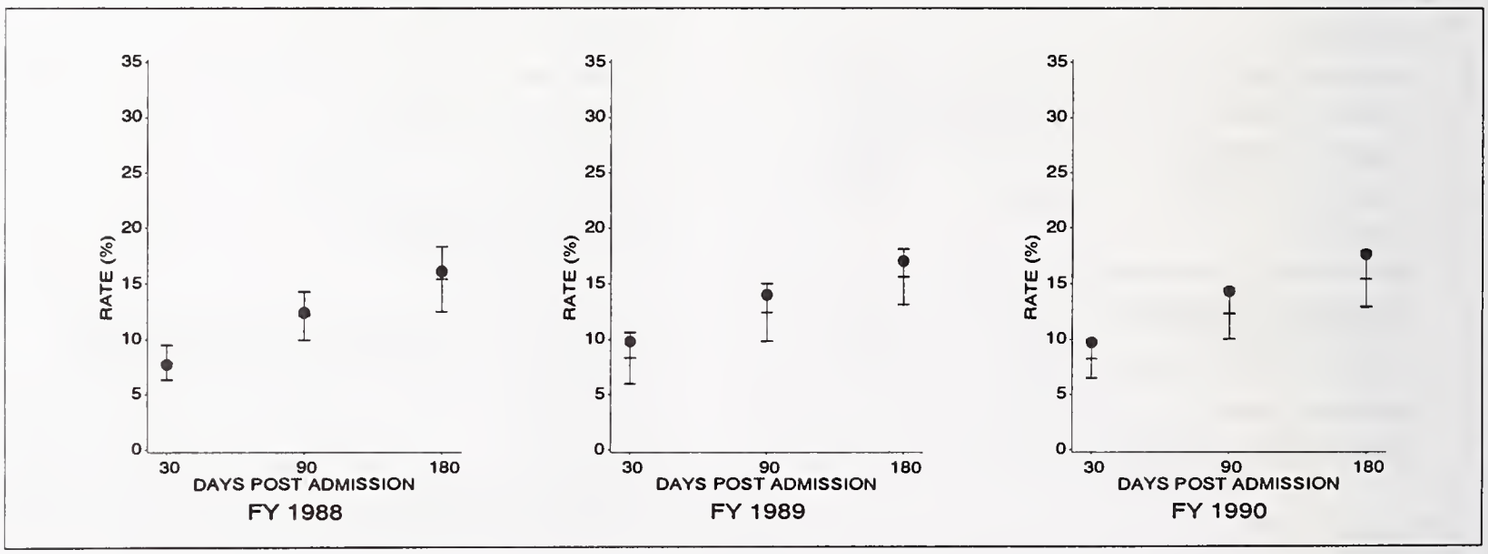
1400 EAST BOULDER
COLORADO SPRINGS, CO 80909
Medicare Provider Number: 060022

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1894	9.7	8.2	0.9	14.3	12.3	1.1	17.6	15.4	1.3
CONDITIONS:										
Acute Myocardial Infarction	64	20.3	20.7	5.1	21.9	23.6	5.5	23.4	26.1	6.2
Congestive Heart Failure	82	13.4	12.1	3.8	23.2	19.2	5.8	26.8	24.7	5.6
Pneumonia/Influenza	103	18.4	14.6	5.6	20.4	20.2	4.8	27.2	24.1	5.1
Chronic Obstructive Pulmonary Disease	35	11.4	9.1	-----	22.9	16.2	-----	25.7	21.5	-----
Transient Cerebral Ischemia	20	10.0	2.7	-----	10.0	6.0	-----	10.0	9.2	-----
Stroke	72	30.6	20.4	6.9	40.3	27.3	7.7	45.8	31.3	8.4
Hip Fracture	64	15.6	4.9	6.0	15.6	9.0	6.0	18.8	12.1	5.8
Sepsis	34	29.4	24.0	-----	32.4	32.3	-----	32.4	37.5	-----
PROCEDURES:										
Angioplasty	58	6.9	3.7	4.4	6.9	4.7	5.1	10.3	5.5	5.9
Coronary Artery Bypass Graft	45	4.4	4.5	-----	4.4	6.1	-----	8.9	7.0	-----
Initial Pacemaker Insertion	29	3.4	4.3	-----	20.7	7.8	-----	24.1	11.0	-----
Carotid Endarterectomy	16	0.0	0.9	-----	0.0	1.8	-----	0.0	2.8	-----
Hip Replacement/Reconstruction	39	10.3	2.8	-----	10.3	5.4	-----	12.8	7.6	-----
Open Reduction of Hip Fracture	25	12.0	4.6	-----	12.0	8.4	-----	12.0	11.4	-----
Prostatectomy	35	5.7	0.9	-----	5.7	2.1	-----	8.6	3.6	-----
Cholecystectomy	39	7.7	1.3	-----	10.3	2.3	-----	10.3	3.2	-----
Hysterectomy	14	0.0	0.1	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEMORIAL HOSPITAL
Medicare Provider Number: 060022

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.9 years
Proportion female	57.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	44.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	40.9 %
Admitted for emergency	47.5 %

COMORBIDITIES:

Cancer	5.5 %
Chronic cardiovascular disease	30.1 %
Chronic liver disease	0.7 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	17.3 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.4%
State	10.5%
Outside State	8.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.1 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	367
Occupancy Rate	50.0 %
Ownership/Control	Local Government
Medicare Discharges	24.6 %
Case Mix Index (CMI)	1.4466

STAFFING:

Total Number of Physicians	300
Percent of Physicians Board Certified Specialists	86.0 %
Medical Residents/Interns	0
Registered Nurses	532
Licensed Practical Nurses	33

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

MEMORIAL HOSPITAL

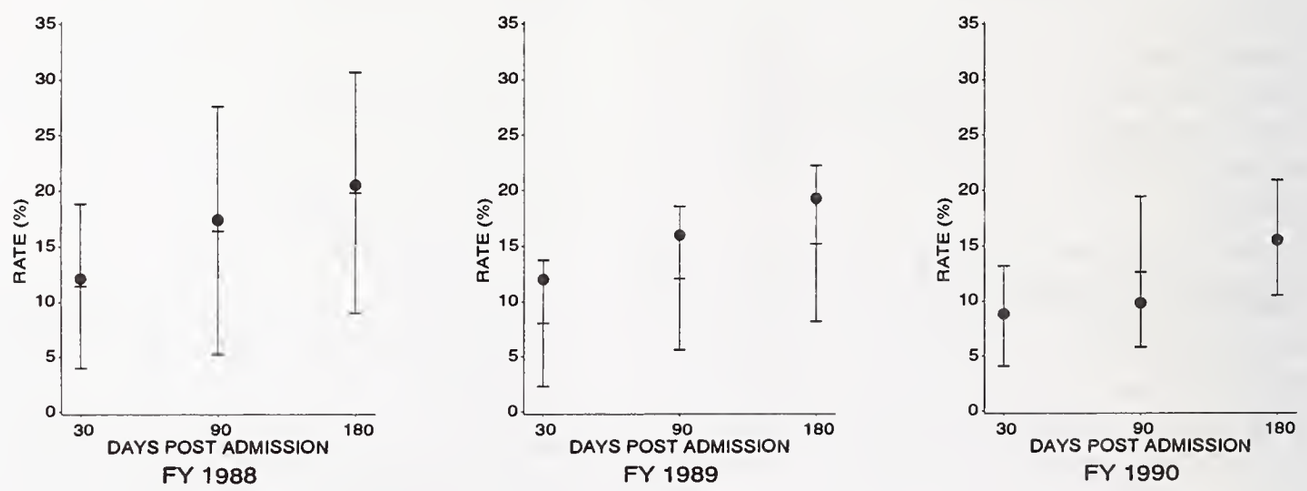
785 RUSSELL ST
CRAIG, CO 81625
Medicare Provider Number: 060046

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	193	8.8	8.6	2.3	9.8	12.6	3.4	15.5	15.7	2.6
CONDITIONS:										
Acute Myocardial Infarction	9	11.1	21.4	-----	11.1	23.7	-----	11.1	25.8	-----
Congestive Heart Failure	4	0.0	16.2	-----	0.0	24.5	-----	0.0	31.5	-----
Pneumonia/Influenza	17	5.9	8.8	-----	11.8	12.3	-----	23.5	14.6	-----
Chronic Obstructive Pulmonary Disease	4	0.0	5.6	-----	0.0	10.7	-----	0.0	15.1	-----
Transient Cerebral Ischemia	1	0.0	0.9	-----	0.0	2.3	-----	0.0	4.1	-----
Stroke	6	50.0	21.3	-----	50.0	28.0	-----	50.0	32.3	-----
Hip Fracture	0									
Sepsis	3	0.0	24.1	-----	0.0	30.1	-----	33.3	34.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	8	0.0	2.7	-----	0.0	4.7	-----	0.0	6.2	-----
Hysterectomy	1	0.0	0.4	-----	0.0	0.9	-----	0.0	1.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEMORIAL HOSPITAL
Medicare Provider Number: 060046

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.7 years
Proportion female	63.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	1.0 %
Admitted for emergency	52.3 %

COMORBIDITIES:

Cancer	2.1 %
Chronic cardiovascular disease	29.0 %
Chronic liver disease	2.1 %
Chronic renal disease	0.5 %
Chronic pulmonary disease	14.0 %
Cerebrovascular degeneration	2.1 %
Diabetes mellitus	8.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	74.5%
State	13.7%
Outside State	11.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	27
Occupancy Rate	33.0 %
Ownership/Control	Local Government
Medicare Discharges	34.7 %
Case Mix Index (CMI)	1.2537

STAFFING:

Total Number of Physicians	11
Percent of Physicians Board Certified Specialists	90.9 %
Medical Residents/Interns	0
Registered Nurses	18
Licensed Practical Nurses	3

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

MERCY MEDICAL CENTER

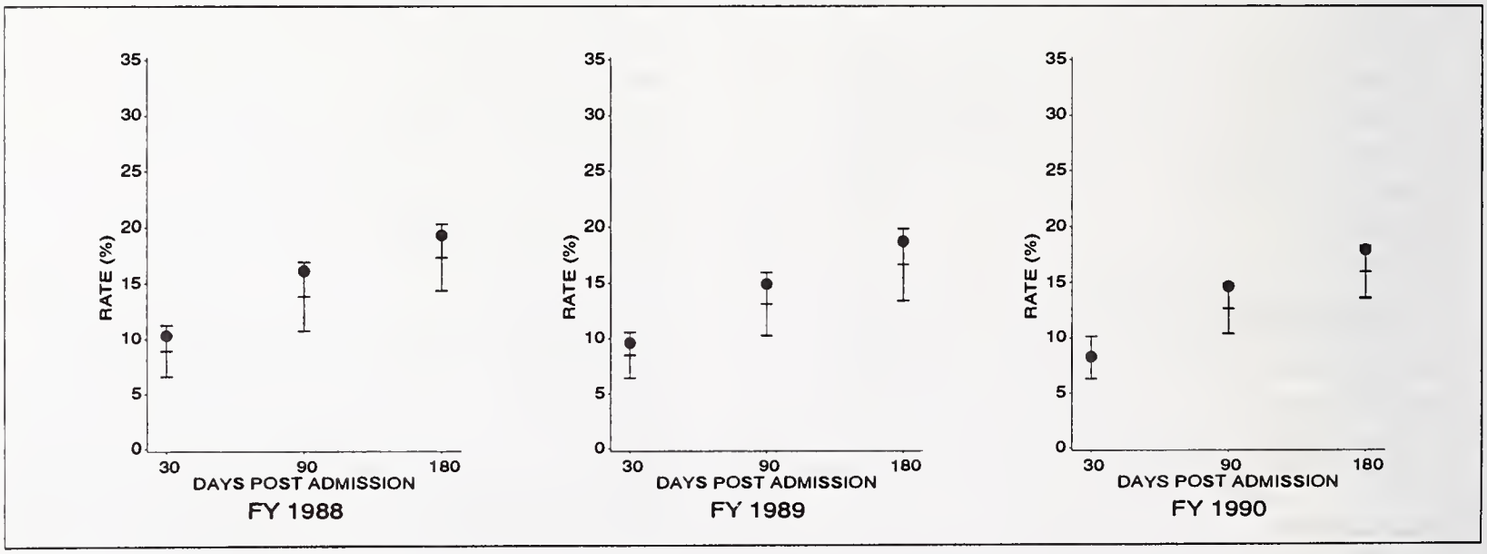
1650 FILLMORE ST
DENVER, CO 80206
Medicare Provider Number: 060026

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1668	8.3	8.2	1.0	14.6	12.6	1.1	17.9	15.9	1.2
CONDITIONS:										
Acute Myocardial Infarction	32	28.1	23.3	-----	28.1	25.6	-----	31.3	27.9	-----
Congestive Heart Failure	84	13.1	14.9	4.1	26.2	21.9	5.8	35.7	27.7	6.5
Pneumonia/Influenza	86	19.8	15.0	4.4	30.2	20.1	6.4	33.7	23.5	6.8
Chronic Obstructive Pulmonary Disease	31	6.5	8.9	-----	9.7	15.4	-----	19.4	19.7	-----
Transient Cerebral Ischemia	11	0.0	1.9	-----	0.0	4.5	-----	9.1	7.5	-----
Stroke	53	9.4	21.3	10.4	24.5	28.4	9.7	26.4	32.6	8.7
Hip Fracture	50	10.0	7.2	-----	18.0	12.8	-----	26.0	16.9	-----
Sepsis	9	33.3	37.2	-----	66.7	48.4	-----	66.7	54.5	-----
PROCEDURES:										
Angioplasty	15	0.0	4.5	-----	0.0	5.6	-----	0.0	6.7	-----
Coronary Artery Bypass Graft	11	9.1	8.1	-----	9.1	11.5	-----	18.2	12.7	-----
Initial Pacemaker Insertion	7	0.0	4.0	-----	0.0	7.5	-----	0.0	10.4	-----
Carotid Endarterectomy	4	0.0	1.8	-----	0.0	3.0	-----	0.0	4.2	-----
Hip Replacement/Reconstruction	47	2.1	2.5	-----	6.4	4.6	-----	8.5	6.3	-----
Open Reduction of Hip Fracture	5	0.0	5.8	-----	0.0	9.9	-----	20.0	12.9	-----
Prostatectomy	66	3.0	1.4	2.1	4.5	3.3	2.5	6.1	5.4	2.9
Cholecystectomy	32	3.1	3.6	-----	6.3	6.5	-----	6.3	8.7	-----
Hysterectomy	9	0.0	1.2	-----	0.0	2.6	-----	0.0	4.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MERCY MEDICAL CENTER
Medicare Provider Number: 060026

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	56.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	36.5 %
Transferred from skilled nursing facility	2.9 %
Admitted for elective procedure	23.7 %
Admitted for emergency	40.8 %

COMORBIDITIES:

Cancer	5.8 %
Chronic cardiovascular disease	34.0 %
Chronic liver disease	3.1 %
Chronic renal disease	2.1 %
Chronic pulmonary disease	17.1 %
Cerebrovascular degeneration	8.1 %
Diabetes mellitus	6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	56.3%
State	40.5%
Outside State	3.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	386
Ownership/Control	Church
Case Mix Index (CMI)	1.3542

STAFFING:

Medical Residents/Interns	7
Registered Nurses	200
Licensed Practical Nurses	4

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

MERCY MEDICAL CENTER OF DURANGO

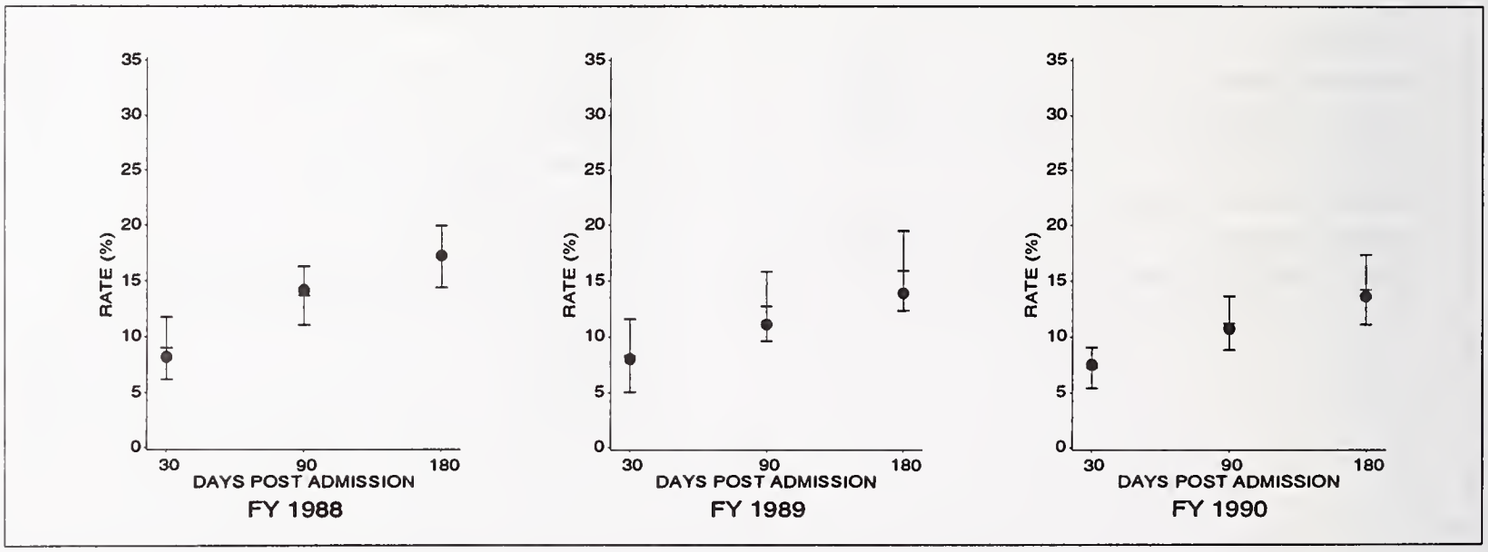
375 E PARK AVE
DURANGO, CO 81301
Medicare Provider Number: 060013

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	844	7.5	7.2	0.9	10.7	11.2	1.2	13.6	14.2	1.6
CONDITIONS:										
Acute Myocardial Infarction	25	24.0	24.9	-----	28.0	28.1	-----	28.0	30.7	-----
Congestive Heart Failure	21	14.3	14.4	-----	23.8	22.6	-----	23.8	29.2	-----
Pneumonia/Influenza	60	20.0	13.0	5.4	23.3	18.5	5.5	23.3	22.1	5.4
Chronic Obstructive Pulmonary Disease	12	8.3	9.4	-----	16.7	16.1	-----	33.3	20.9	-----
Transient Cerebral Ischemia	11	0.0	2.0	-----	18.2	4.5	-----	18.2	7.3	-----
Stroke	20	5.0	20.5	-----	20.0	26.6	-----	25.0	31.1	-----
Hip Fracture	35	5.7	7.2	-----	11.4	13.1	-----	14.3	17.2	-----
Sepsis	6	16.7	18.0	-----	33.3	23.8	-----	50.0	27.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	9	0.0	1.3	-----	0.0	2.8	-----	0.0	4.7	-----
Carotid Endarterectomy	9	0.0	2.1	-----	0.0	3.9	-----	11.1	5.9	-----
Hip Replacement/Reconstruction	19	0.0	4.5	-----	5.3	8.9	-----	5.3	12.4	-----
Open Reduction of Hip Fracture	16	0.0	6.0	-----	6.3	11.5	-----	12.5	15.6	-----
Prostatectomy	36	0.0	0.7	-----	0.0	1.7	-----	0.0	3.0	-----
Cholecystectomy	19	0.0	2.5	-----	0.0	4.7	-----	0.0	6.2	-----
Hysterectomy	12	0.0	0.3	-----	0.0	0.6	-----	0.0	1.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MERCY MEDICAL CENTER OF DURANGO

Medicare Provider Number: 060013

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	
Average age at admission	74.3 years
Proportion female	54.9 %
ADMISSION SOURCES/TYPES:	
Referred by personal or HMO physician	56.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.1 %
Admitted for emergency	27.7 %

COMORBIDITIES:	
Cancer	5.8 %
Chronic cardiovascular disease	30.0 %
Chronic liver disease	1.3 %
Chronic renal disease	1.7 %
Chronic pulmonary disease	17.9 %
Cerebrovascular degeneration	4.6 %
Diabetes mellitus	5.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	
County/City	61.0%
State	19.9%
Outside State	19.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:	
Hospital	5.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:	
Total Beds	101
Occupancy Rate	50.0 %
Ownership/Control	Church
Medicare Discharges	33.7 %
Case Mix Index (CMI)	1.1899
STAFFING:	
Total Number of Physicians	76
Percent of Physicians Board Certified Specialists	93.4 %
Medical Residents/Interns	0
Registered Nurses	84
Licensed Practical Nurses	9

SPECIALTY SERVICES:	
Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

MONTROSE MEMORIAL HOSPITAL

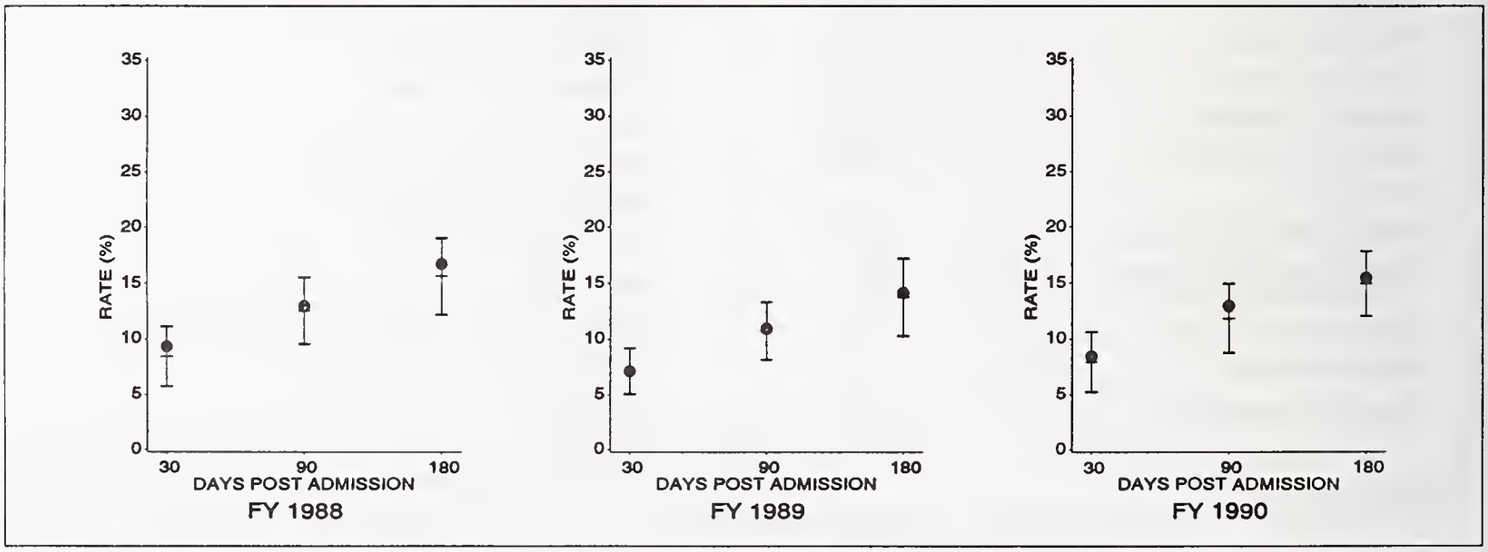
800 S 3RD ST
MONTROSE, CO 81401
Medicare Provider Number: 060006

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	680	8.4	7.9	1.3	12.9	11.8	1.6	15.4	14.9	1.4
CONDITIONS:										
Acute Myocardial Infarction	29	31.0	30.4	-----	34.5	33.1	-----	37.9	36.1	-----
Congestive Heart Failure	21	9.5	13.2	-----	14.3	21.6	-----	23.8	27.2	-----
Pneumonia/Influenza	33	9.1	10.4	-----	12.1	14.8	-----	15.2	17.8	-----
Chronic Obstructive Pulmonary Disease	10	20.0	5.1	-----	20.0	8.9	-----	30.0	12.2	-----
Transient Cerebral Ischemia	5	0.0	1.0	-----	20.0	2.3	-----	20.0	3.7	-----
Stroke	16	18.8	22.3	-----	25.0	30.0	-----	25.0	34.3	-----
Hip Fracture	26	11.5	5.4	-----	19.2	9.9	-----	23.1	13.3	-----
Sepsis	5	20.0	26.8	-----	20.0	32.6	-----	20.0	37.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	8	0.0	1.5	-----	12.5	2.7	-----	12.5	3.7	-----
Open Reduction of Hip Fracture	14	14.3	4.9	-----	14.3	9.2	-----	14.3	12.6	-----
Prostatectomy	21	4.8	0.6	-----	4.8	1.5	-----	9.5	2.6	-----
Cholecystectomy	16	6.3	2.4	-----	6.3	5.0	-----	6.3	7.0	-----
Hysterectomy	15	0.0	1.5	-----	0.0	3.4	-----	13.3	5.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MONTROSE MEMORIAL HOSPITAL
Medicare Provider Number: 060006

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.4 years
Proportion female	53.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	99.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	20.0 %
Admitted for emergency	49.0 %

COMORBIDITIES:

Cancer	6.9 %
Chronic cardiovascular disease	26.6 %
Chronic liver disease	1.3 %
Chronic renal disease	1.0 %
Chronic pulmonary disease	21.8 %
Cerebrovascular degeneration	4.1 %
Diabetes mellitus	6.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	72.7%
State	22.7%
Outside State	4.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	68
Occupancy Rate	50.0 %
Ownership/Control	Local Government
Medicare Discharges	35.5 %
Case Mix Index (CMI)	1.1314

STAFFING:

Total Number of Physicians	34
Percent of Physicians Board Certified Specialists	85.3 %
Medical Residents/Interns	0
Registered Nurses	67
Licensed Practical Nurses	27

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

MOUNT SAN RAFAEL HOSPITAL

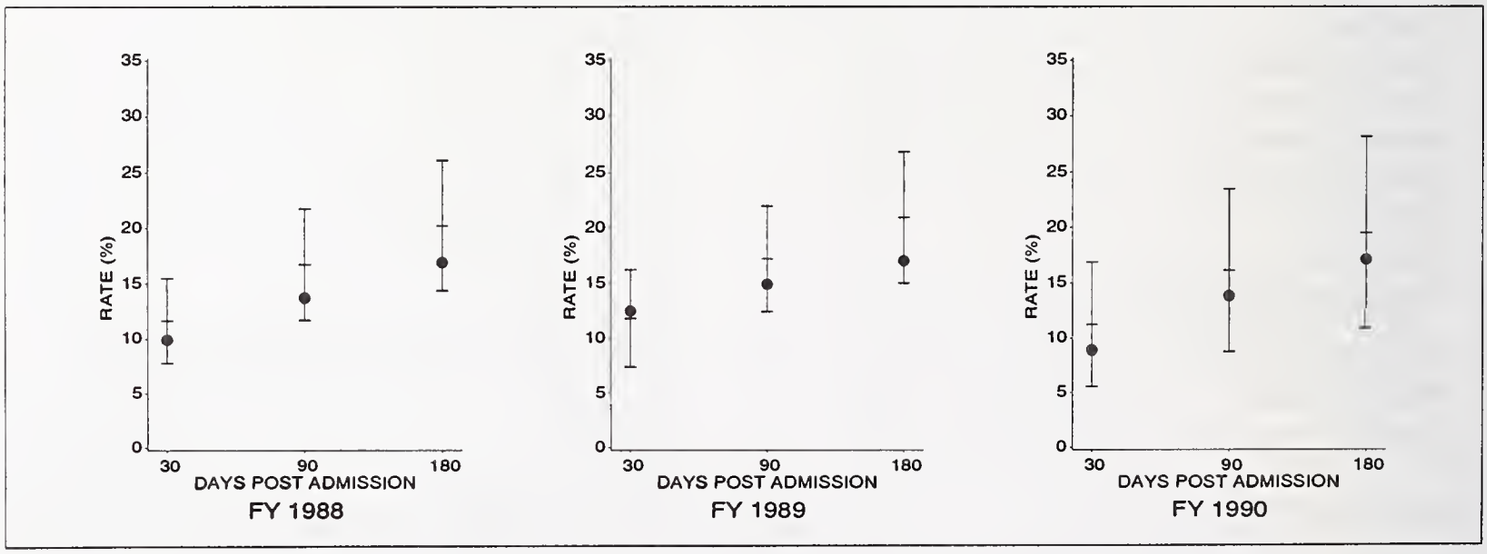
410 BENEDICTA AVE
TRINIDAD, CO 81082
Medicare Provider Number: 060033

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	327	8.9	11.2	2.8	13.8	16.1	3.7	17.1	19.5	4.3
CONDITIONS:										
Acute Myocardial Infarction	19	31.6	22.3	-----	31.6	25.0	-----	31.6	27.1	-----
Congestive Heart Failure	19	21.1	13.4	-----	21.1	21.3	-----	26.3	28.1	-----
Pneumonia/Influenza	39	5.1	17.4	-----	10.3	24.1	-----	15.4	28.1	-----
Chronic Obstructive Pulmonary Disease	2	0.0	7.2	-----	0.0	12.7	-----	0.0	16.5	-----
Transient Cerebral Ischemia	6	0.0	2.3	-----	16.7	5.5	-----	16.7	8.8	-----
Stroke	18	33.3	24.2	-----	44.4	34.1	-----	44.4	39.1	-----
Hip Fracture	13	7.7	7.3	-----	7.7	11.6	-----	15.4	14.8	-----
Sepsis	7	0.0	26.8	-----	14.3	33.7	-----	14.3	38.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	2.8	-----	0.0	6.0	-----	0.0	9.4	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	0.0	5.8	-----	0.0	9.8	-----	20.0	12.7	-----
Open Reduction of Hip Fracture	7	14.3	7.0	-----	14.3	11.3	-----	14.3	14.5	-----
Prostatectomy	2	0.0	0.7	-----	0.0	2.0	-----	0.0	3.8	-----
Cholecystectomy	4	0.0	2.3	-----	0.0	4.1	-----	0.0	5.0	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MOUNT SAN RAFAEL HOSPITAL
Medicare Provider Number: 060033

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.3 years
Proportion female	56.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	25.4 %
Transferred from skilled nursing facility	3.7 %
Admitted for elective procedure	27.5 %
Admitted for emergency	70.3 %

COMORBIDITIES:

Cancer	5.5 %
Chronic cardiovascular disease	38.8 %
Chronic liver disease	0.3 %
Chronic renal disease	1.5 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	7.0 %
Diabetes mellitus	9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	94.1%
State	1.5%
Outside State	4.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	38
Occupancy Rate	39.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.2 %
Case Mix Index (CMI)	1.1073

STAFFING:

Total Number of Physicians	11
Percent of Physicians Board Certified Specialists	81.8 %
Medical Residents/Interns	0
Registered Nurses	19
Licensed Practical Nurses	9

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

NORTH COLORADO MEDICAL CENTER

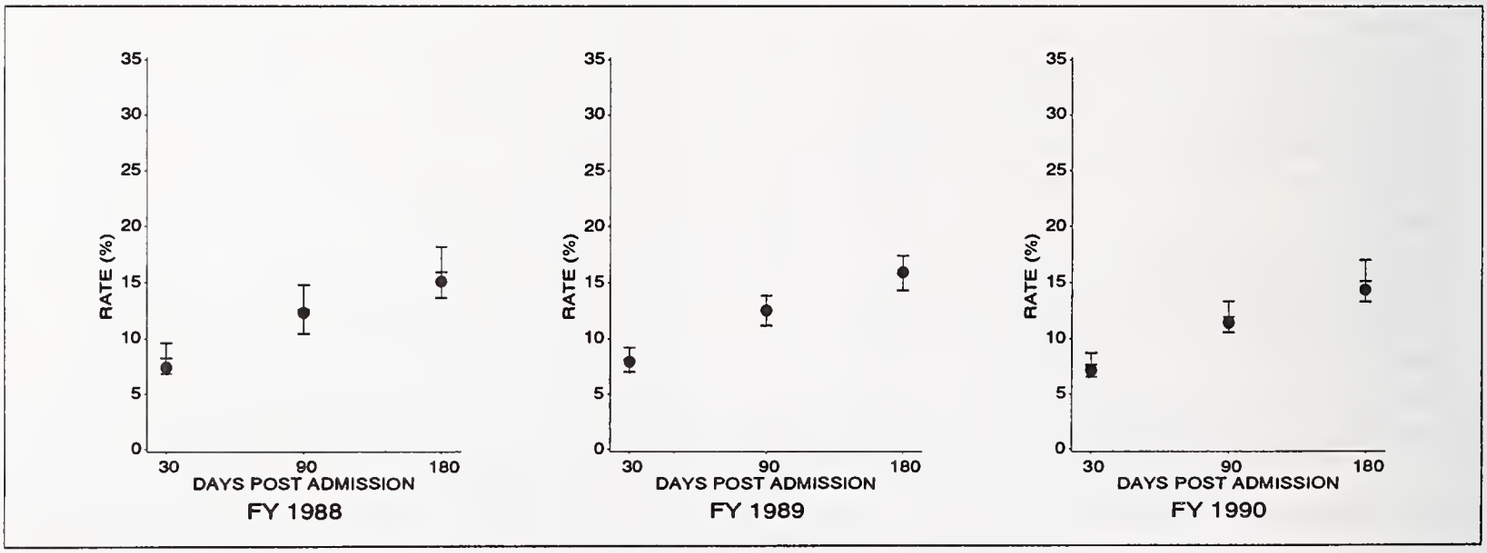
1801 16TH STREET
GREELEY, CO 80631
Medicare Provider Number: 060001

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2716	7.1	7.6	0.5	11.4	11.9	0.7	14.3	15.1	0.9
CONDITIONS:										
Acute Myocardial Infarction	87	21.8	19.3	5.1	21.8	21.9	5.0	24.1	24.2	4.8
Congestive Heart Failure	114	15.8	14.1	4.6	21.9	22.1	4.2	28.9	28.3	4.4
Pneumonia/Influenza	127	15.7	13.6	3.3	22.0	19.1	3.9	28.3	22.8	5.0
Chronic Obstructive Pulmonary Disease	42	4.8	7.0	-----	19.0	12.9	-----	26.2	17.6	-----
Transient Cerebral Ischemia	41	2.4	1.4	-----	2.4	3.4	-----	4.9	5.7	-----
Stroke	83	15.7	16.7	4.3	22.9	23.5	4.7	27.7	27.5	6.0
Hip Fracture	86	8.1	6.5	3.0	10.5	11.9	3.8	12.8	15.8	5.6
Sepsis	28	14.3	22.6	-----	14.3	29.8	-----	21.4	34.6	-----
PROCEDURES:										
Angioplasty	49	12.2	3.8	-----	12.2	4.5	-----	14.3	5.3	-----
Coronary Artery Bypass Graft	49	4.1	6.3	-----	4.1	9.0	-----	4.1	10.2	-----
Initial Pacemaker Insertion	13	7.7	2.8	-----	7.7	5.2	-----	7.7	7.6	-----
Carotid Endarterectomy	5	0.0	1.2	-----	0.0	2.2	-----	0.0	3.4	-----
Hip Replacement/Reconstruction	75	2.7	2.3	1.8	4.0	4.3	2.6	4.0	5.8	3.6
Open Reduction of Hip Fracture	37	8.1	5.8	-----	10.8	10.9	-----	13.5	14.8	-----
Prostatectomy	90	0.0	0.8	1.2	1.1	1.9	1.6	1.1	3.3	2.7
Cholecystectomy	77	3.9	2.7	2.5	6.5	5.3	3.8	7.8	7.3	4.8
Hysterectomy	23	0.0	0.4	-----	0.0	1.0	-----	0.0	1.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTH COLORADO MEDICAL CENTER
Medicare Provider Number: 060001

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.6 years
Proportion female	51.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	54.6 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	14.5 %
Admitted for emergency	1.3 %

COMORBIDITIES:

Cancer	6.5 %
Chronic cardiovascular disease	32.9 %
Chronic liver disease	1.0 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	19.7 %
Cerebrovascular degeneration	4.9 %
Diabetes mellitus	8.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	79.6%
State	16.3%
Outside State	4.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	281
Occupancy Rate	56.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	35.3 %
Case Mix Index (CMI)	1.4393

STAFFING:

Total Number of Physicians	163
Percent of Physicians Board Certified Specialists	84.7 %
Medical Residents/Interns	19
Registered Nurses	310
Licensed Practical Nurses	16

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

P-SL AURORA PRESBYTERIAN HOSPITAL

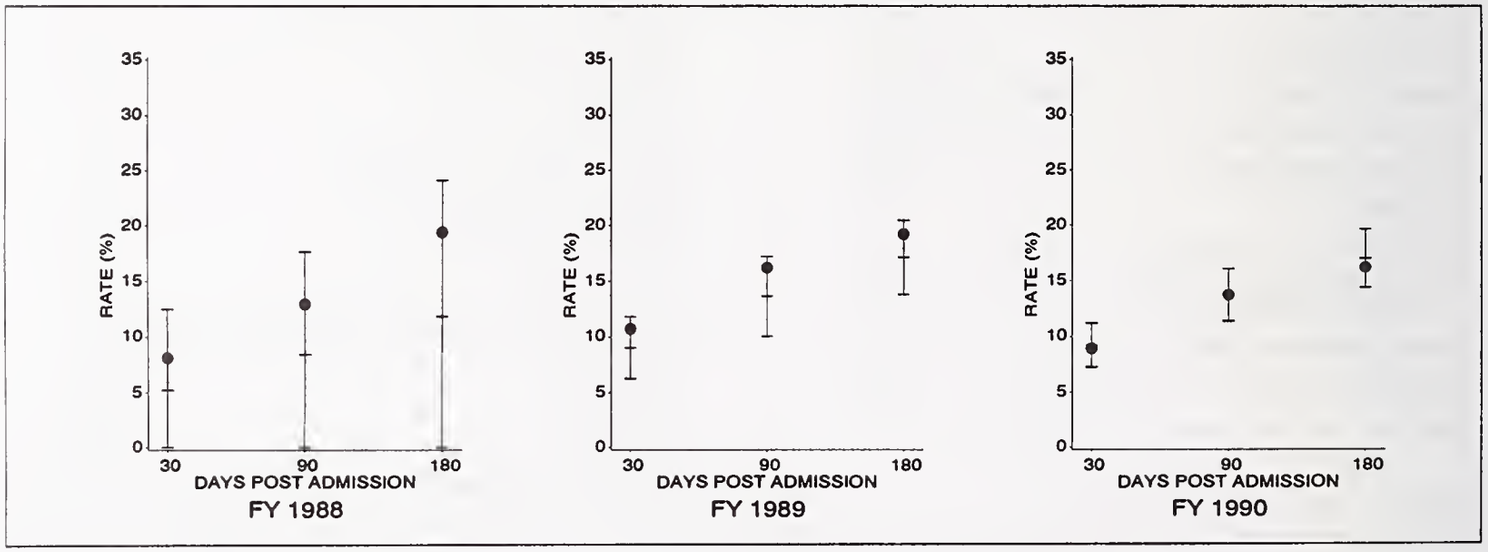
700 POTOMAC STREET
AURORA, CO 80011
Medicare Provider Number: 060100

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1041	8.9	9.2	1.0	13.7	13.7	1.2	16.2	17.0	1.3
CONDITIONS:										
Acute Myocardial Infarction	35	17.1	27.9	-----	25.7	30.1	-----	28.6	32.5	-----
Congestive Heart Failure	45	4.4	13.5	-----	15.6	21.4	-----	20.0	27.8	-----
Pneumonia/Influenza	60	13.3	13.1	4.5	16.7	18.5	5.1	16.7	22.1	6.2
Chronic Obstructive Pulmonary Disease	23	4.3	7.5	-----	4.3	12.9	-----	4.3	16.9	-----
Transient Cerebral Ischemia	7	0.0	1.4	-----	0.0	3.4	-----	0.0	6.1	-----
Stroke	31	22.6	18.6	-----	25.8	24.6	-----	29.0	28.4	-----
Hip Fracture	39	7.7	6.0	-----	7.7	10.5	-----	10.3	13.7	-----
Sepsis	10	30.0	15.4	-----	30.0	21.9	-----	30.0	25.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	2	0.0	5.1	-----	0.0	9.5	-----	0.0	12.7	-----
Hip Replacement/Reconstruction	25	4.0	3.0	-----	4.0	5.2	-----	4.0	6.9	-----
Open Reduction of Hip Fracture	21	4.8	4.8	-----	4.8	8.9	-----	9.5	12.0	-----
Prostatectomy	37	2.7	0.9	-----	8.1	2.1	-----	10.8	3.6	-----
Cholecystectomy	30	3.3	3.1	-----	3.3	5.8	-----	10.0	7.9	-----
Hysterectomy	7	0.0	0.2	-----	0.0	0.4	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



P-SL AURORA PRESBYTERIAN HOSPITAL
Medicare Provider Number: 060100

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	59.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.7 %
Transferred from skilled nursing facility	1.0 %
Admitted for elective procedure	19.3 %
Admitted for emergency	22.1 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	30.3 %
Chronic liver disease	0.5 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	15.9 %
Cerebrovascular degeneration	2.6 %
Diabetes mellitus	6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	39.6%
State	50.7%
Outside State	9.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1988

PROFILE:

Total Beds	146
Ownership/Control	Private, For Profit
Case Mix Index (CMI)	1.3359

STAFFING:

Medical Residents/Interns	0
Registered Nurses	100
Licensed Practical Nurses	20

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

PARKVIEW EPISCOPAL MEDICAL CENTER

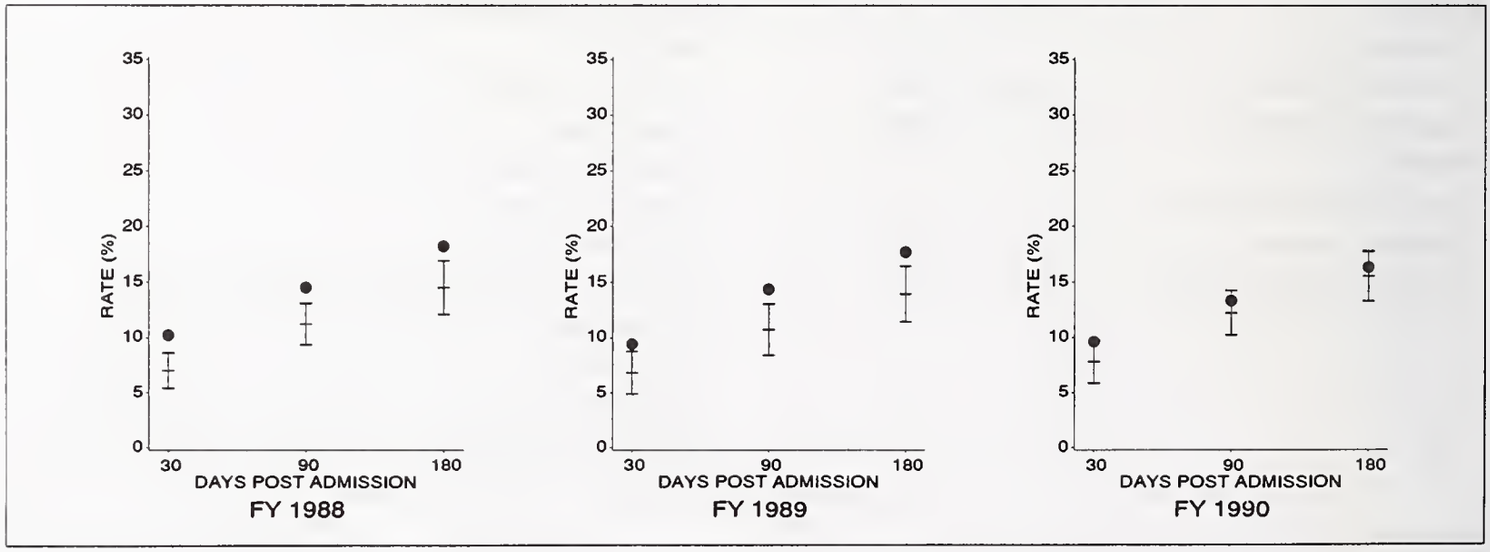
400 W 16TH ST
PUEBLO, CO 81003
Medicare Provider Number: 060020

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1334	9.6	7.8	1.0	13.3	12.2	1.0	16.3	15.5	1.1
CONDITIONS:										
Acute Myocardial Infarction	45	20.0	23.2	-----	22.2	26.6	-----	24.4	29.5	-----
Congestive Heart Failure	47	6.4	13.1	-----	12.8	21.1	-----	21.3	27.1	-----
Pneumonia/Influenza	59	22.0	14.0	8.4	23.7	19.6	7.1	27.1	23.3	6.4
Chronic Obstructive Pulmonary Disease	30	3.3	7.2	-----	10.0	12.6	-----	10.0	16.8	-----
Transient Cerebral Ischemia	24	0.0	1.1	-----	0.0	2.7	-----	0.0	4.8	-----
Stroke	59	18.6	16.9	5.0	18.6	22.5	5.9	22.0	26.1	6.2
Hip Fracture	39	2.6	5.0	-----	17.9	9.5	-----	23.1	13.0	-----
Sepsis	5	20.0	25.2	-----	20.0	34.6	-----	20.0	40.2	-----
PROCEDURES:										
Angioplasty	18	0.0	5.1	-----	0.0	7.1	-----	0.0	8.4	-----
Coronary Artery Bypass Graft	12	0.0	4.3	-----	8.3	5.9	-----	8.3	6.8	-----
Initial Pacemaker Insertion	13	0.0	2.1	-----	0.0	4.3	-----	0.0	6.6	-----
Carotid Endarterectomy	5	0.0	1.5	-----	0.0	2.8	-----	20.0	4.3	-----
Hip Replacement/Reconstruction	30	0.0	2.8	-----	13.3	5.3	-----	13.3	7.4	-----
Open Reduction of Hip Fracture	18	5.6	4.2	-----	16.7	8.4	-----	22.2	11.8	-----
Prostatectomy	23	0.0	0.9	-----	0.0	2.2	-----	0.0	3.7	-----
Choiecystectomy	38	5.3	2.7	-----	5.3	4.9	-----	7.9	6.5	-----
Hysterectomy	10	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PARKVIEW EPISCOPAL MEDICAL CENTER

Medicare Provider Number: 060020

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.7 years
Proportion female	55.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	86.5 %
Transferred from skilled nursing facility	0.7 %
Admitted for elective procedure	46.7 %
Admitted for emergency	6.1 %

COMORBIDITIES:

Cancer	5.2 %
Chronic cardiovascular disease	36.6 %
Chronic liver disease	1.4 %
Chronic renal disease	2.5 %
Chronic pulmonary disease	23.5 %
Cerebrovascular degeneration	5.7 %
Diabetes mellitus	10.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	77.2%
State	19.8%
Outside State	3.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.1 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	229
Occupancy Rate	58.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	31.6 %
Case Mix Index (CMI)	1.4736

STAFFING:

Total Number of Physicians	123
Percent of Physicians Board Certified Specialists	72.4 %
Medical Residents/Interns	0
Registered Nurses	145
Licensed Practical Nurses	38

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

PENROSE-SAINT FRANCIS HOSPITAL

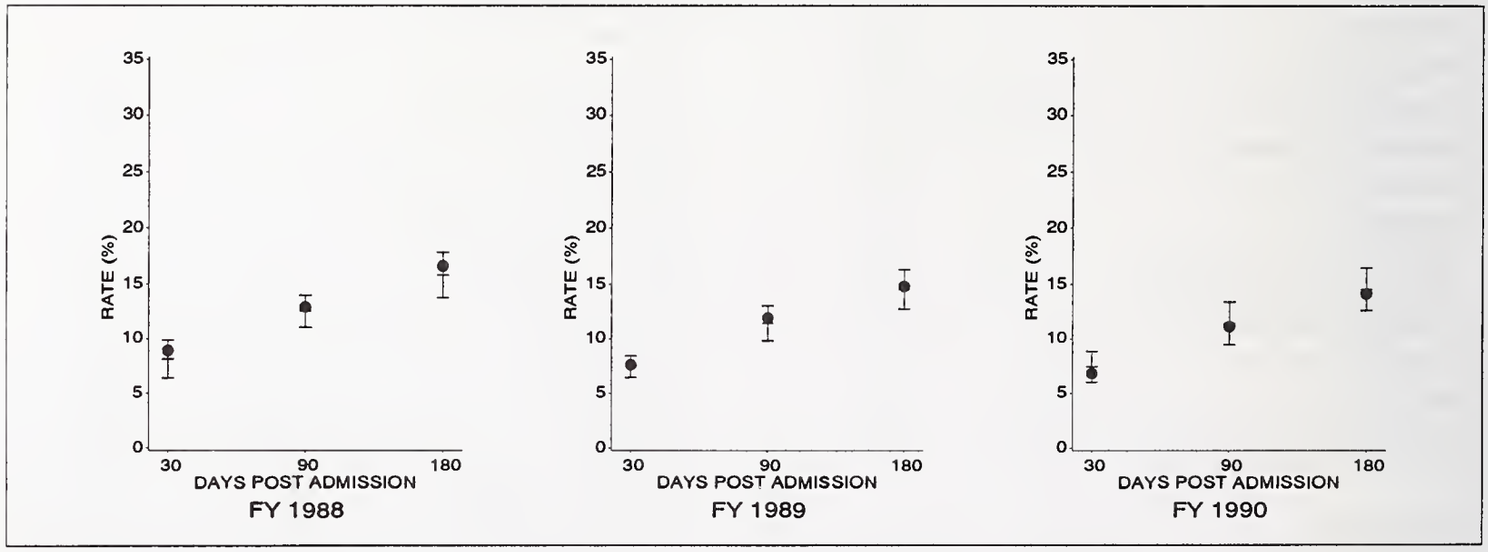
2215 NORTH CASCADE
COLORADO SPRINGS, CO 80907
Medicare Provider Number: 060031

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3836	6.8	7.4	0.7	11.1	11.4	1.0	14.1	14.5	1.0
CONDITIONS:										
Acute Myocardial Infarction	105	16.2	24.2	5.4	17.1	26.7	5.5	18.1	28.9	5.9
Congestive Heart Failure	98	10.2	14.2	5.4	18.4	22.6	7.0	23.5	28.8	8.4
Pneumonia/Influenza	155	16.8	13.9	3.7	20.0	19.3	3.4	21.9	22.9	3.6
Chronic Obstructive Pulmonary Disease	72	5.6	7.6	3.6	12.5	13.4	4.8	20.8	17.9	5.8
Transient Cerebral Ischemia	55	1.8	2.0	1.9	1.8	4.4	3.7	1.8	6.9	5.9
Stroke	127	18.1	18.6	3.5	24.4	25.2	4.1	26.0	28.9	5.1
Hip Fracture	110	7.3	6.4	2.4	12.7	11.3	3.2	15.5	14.7	3.6
Sepsis	32	18.8	25.6	-----	28.1	34.5	-----	34.4	39.7	-----
PROCEDURES:										
Angioplasty	72	4.2	4.0	2.4	5.6	4.8	2.7	5.6	5.6	2.9
Coronary Artery Bypass Graft	78	7.7	6.0	3.0	7.7	8.3	3.3	9.0	9.2	3.9
Initial Pacemaker Insertion	29	3.4	2.7	-----	3.4	5.1	-----	6.9	7.2	-----
Carotid Endarterectomy	7	0.0	1.0	-----	0.0	1.9	-----	0.0	2.8	-----
Hip Replacement/Reconstruction	95	2.1	2.6	1.7	6.3	4.8	2.4	8.4	6.5	3.3
Open Reduction of Hip Fracture	45	8.9	6.2	-----	13.3	11.2	-----	15.6	14.9	-----
Prostatectomy	152	0.7	0.8	0.7	2.0	1.9	1.2	5.3	3.2	2.0
Cholecystectomy	62	6.5	3.0	4.2	8.1	5.1	4.7	9.7	6.4	5.1
Hysterectomy	33	0.0	0.6	-----	0.0	1.5	-----	3.0	2.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PENROSE-SAINT FRANCIS HOSPITAL

Medicare Provider Number: 060031

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.5 years
Proportion female	56.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	51.0 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	25.5 %
Admitted for emergency	45.0 %

COMORBIDITIES:

Cancer	8.3 %
Chronic cardiovascular disease	29.7 %
Chronic liver disease	0.7 %
Chronic renal disease	3.3 %
Chronic pulmonary disease	14.0 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	4.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	78.6%
State	14.2%
Outside State	7.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	639
Occupancy Rate	63.0 %
Ownership/Control	Church
Medicare Discharges	31.2 %
Case Mix Index (CMI)	1.3894

STAFFING:

Total Number of Physicians	812
Percent of Physicians Board Certified Specialists	51.4 %
Medical Residents/Interns	6
Registered Nurses	766
Licensed Practical Nurses	43

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

PIONEERS HOSPITAL OF RIO BLANCO

345 CLEVELAND
MEEKER, CO 81641
Medicare Provider Number: 060041

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	39	10.3	7.6	-----	10.3	11.6	-----	12.8	14.8	-----
CONDITIONS:										
Acute Myocardial Infarction	3	33.3	26.3	-----	33.3	30.7	-----	33.3	33.9	-----
Congestive Heart Failure	3	33.3	10.9	-----	33.3	17.2	-----	33.3	23.8	-----
Pneumonia/Influenza	1	0.0	6.4	-----	0.0	10.0	-----	0.0	12.8	-----
Chronic Obstructive Pulmonary Disease	1	0.0	2.2	-----	0.0	4.7	-----	0.0	7.8	-----
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation
was not computed for one or more of the three fiscal years,
(1988, 1989, or 1990)

PIONEERS HOSPITAL OF RIO BLANCO
Medicare Provider Number: 060041

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	64.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	94.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	0.0 %
Chronic cardiovascular disease	23.1 %
Chronic liver disease	0.0 %
Chronic renal disease	5.1 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	2.6 %
Diabetes mellitus	5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.3%
State	14.8%
Outside State	1.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	42
Occupancy Rate	76.0 %
Ownership/Control	Local Government
Medicare Discharges	24.1 %
Case Mix Index (CMI)	1.1971

STAFFING:

Total Number of Physicians	20
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	7
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

PLATTE VALLEY MEDICAL CENTER

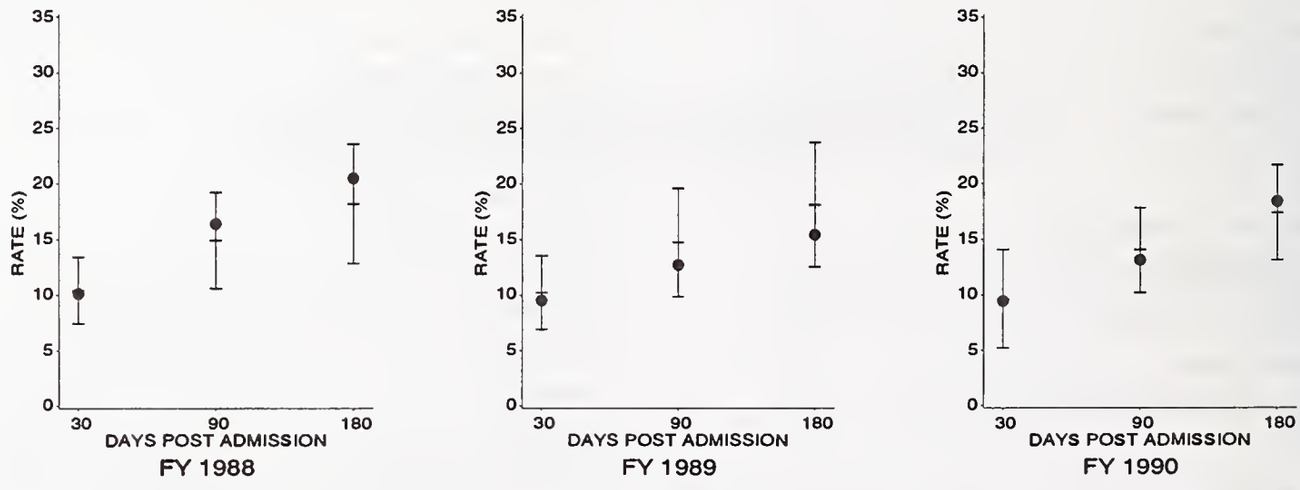
1850 EGBERT ST
BRIGHTON, CO 80601
Medicare Provider Number: 060004

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	374	9.4	9.6	2.2	13.1	14.0	1.9	18.4	17.4	2.1
CONDITIONS:										
Acute Myocardial Infarction	11	18.2	25.6	-----	27.3	29.1	-----	27.3	31.7	-----
Congestive Heart Failure	27	7.4	14.3	-----	14.8	22.3	-----	22.2	28.1	-----
Pneumonia/Influenza	56	5.4	15.2	7.8	14.3	20.9	7.4	19.6	24.6	6.9
Chronic Obstructive Pulmonary Disease	13	15.4	5.7	-----	15.4	10.6	-----	15.4	14.6	-----
Transient Cerebral Ischemia	2	0.0	1.5	-----	0.0	3.2	-----	0.0	5.2	-----
Stroke	12	25.0	19.2	-----	25.0	24.8	-----	25.0	28.5	-----
Hip Fracture	4	50.0	10.6	-----	50.0	18.3	-----	50.0	24.4	-----
Sepsis	3	0.0	28.9	-----	0.0	35.3	-----	33.3	38.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	1	0.0	5.2	-----	0.0	11.0	-----	0.0	16.4	-----
Prostatectomy	19	0.0	0.5	-----	0.0	1.2	-----	0.0	2.3	-----
Cholecystectomy	6	16.7	1.8	-----	16.7	3.3	-----	16.7	4.1	-----
Hysterectomy	6	16.7	0.1	-----	16.7	0.3	-----	16.7	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PLATTE VALLEY MEDICAL CENTER

Medicare Provider Number: 060004

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.6 years
Proportion female	59.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.3 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	71.9 %

COMORBIDITIES:

Cancer	2.9 %
Chronic cardiovascular disease	30.2 %
Chronic liver disease	0.5 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	18.4 %
Cerebrovascular degeneration	2.7 %
Diabetes mellitus	5.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	71.3%
State	26.6%
Outside State	2.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	58
Occupancy Rate	32.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	35.6 %
Case Mix Index (CMI)	1.0020

STAFFING:

Total Number of Physicians	32
Percent of Physicians Board Certified Specialists	59.4 %
Medical Residents/Interns	0
Registered Nurses	52
Licensed Practical Nurses	8

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

PORTER MEMORIAL HOSPITAL

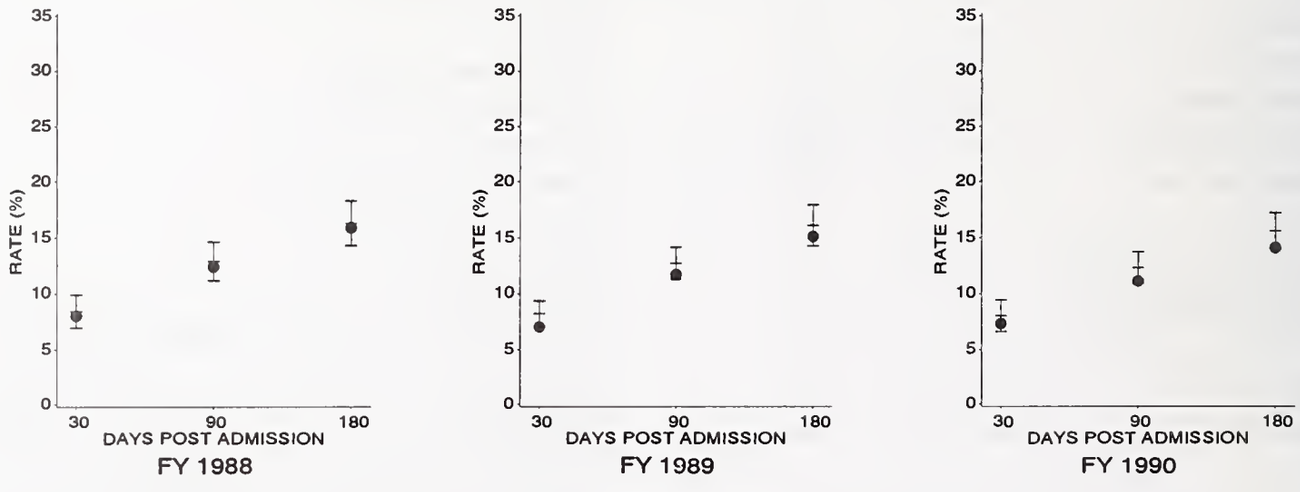
2525 SOUTH DOWNING ST
DENVER, CO 80210
Medicare Provider Number: 060064

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3379	7.3	8.0	0.7	11.1	12.3	0.7	14.1	15.6	0.8
CONDITIONS:										
Acute Myocardial Infarction	112	22.3	22.5	4.0	27.7	25.8	4.7	29.5	28.5	5.1
Congestive Heart Failure	123	7.3	14.0	5.3	17.1	22.2	5.4	25.2	28.2	5.3
Pneumonia/Influenza	133	12.0	13.5	3.3	13.5	18.7	4.5	15.0	22.4	5.3
Chronic Obstructive Pulmonary Disease	71	9.9	7.5	4.1	16.9	13.0	4.6	21.1	17.3	5.3
Transient Cerebral Ischemia	38	0.0	1.7	-----	5.3	3.8	-----	10.5	6.3	-----
Stroke	102	18.6	19.8	4.4	26.5	27.0	4.5	35.3	30.8	5.5
Hip Fracture	114	7.9	7.1	3.0	12.3	12.6	3.3	14.9	16.3	3.7
Sepsis	22	22.7	20.9	-----	22.7	27.2	-----	40.9	31.6	-----
PROCEDURES:										
Angioplasty	52	3.8	3.4	2.6	3.8	4.5	2.9	3.8	5.6	3.6
Coronary Artery Bypass Graft	62	6.5	6.5	3.2	8.1	9.5	3.9	9.7	10.7	4.0
Initial Pacemaker Insertion	33	0.0	4.8	-----	3.0	8.9	-----	3.0	12.1	-----
Carotid Endarterectomy	9	0.0	1.7	-----	0.0	3.2	-----	0.0	4.8	-----
Hip Replacement/Reconstruction	70	5.7	5.1	2.9	7.1	9.4	4.6	8.6	12.6	5.4
Open Reduction of Hip Fracture	44	9.1	5.8	-----	13.6	10.6	-----	13.6	14.0	-----
Prostatectomy	91	1.1	1.0	1.1	2.2	2.3	2.1	2.2	4.0	3.0
Cholecystectomy	42	2.4	2.6	-----	7.1	4.9	-----	9.5	6.6	-----
Hysterectomy	22	0.0	0.3	-----	0.0	0.7	-----	0.0	1.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PORTER MEMORIAL HOSPITAL
Medicare Provider Number: 060064

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.9 years
Proportion female	56.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	51.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	47.8 %

COMORBIDITIES:

Cancer	7.0 %
Chronic cardiovascular disease	38.2 %
Chronic liver disease	0.6 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	17.4 %
Cerebrovascular degeneration	4.3 %
Diabetes mellitus	5.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	40.7%
State	51.2%
Outside State	8.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.0 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	473
Ownership/Control	Church
Case Mix Index (CMI)	1.3180

STAFFING:

Medical Residents/Interns	0
Registered Nurses	569
Licensed Practical Nurses	4

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

POUDRE VALLEY HOSPITAL

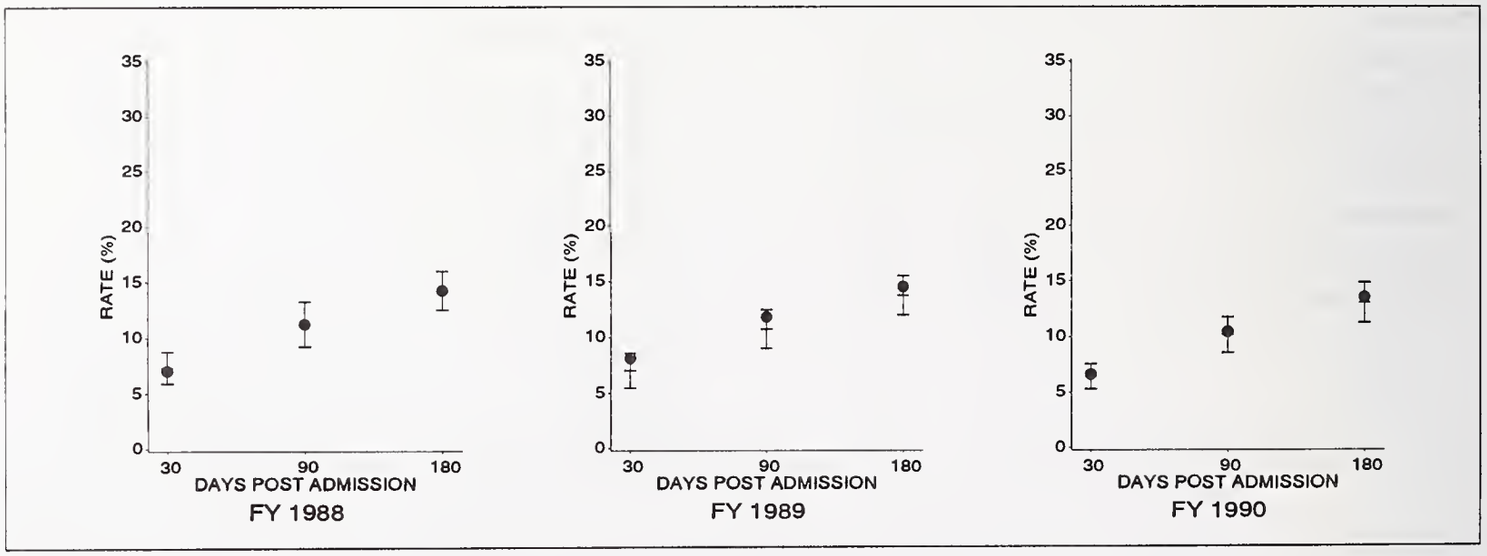
1024 LEMAY AVE
FORT COLLINS, CO 80524
Medicare Provider Number: 060010

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2206	6.6	6.4	0.6	10.4	10.1	0.8	13.5	13.0	0.9
CONDITIONS:										
Acute Myocardial Infarction	65	10.8	21.8	7.9	13.8	25.0	8.0	18.5	27.5	8.1
Congestive Heart Failure	88	6.8	13.1	6.1	12.5	20.9	7.5	23.9	26.9	8.1
Pneumonia/Influenza	86	15.1	13.6	4.6	20.9	19.2	7.2	26.7	22.9	8.3
Chronic Obstructive Pulmonary Disease	33	6.1	7.6	-----	15.2	13.3	-----	18.2	17.8	-----
Transient Cerebral Ischemia	26	0.0	1.6	-----	7.7	3.7	-----	7.7	6.2	-----
Stroke	67	17.9	21.6	8.2	23.9	28.2	7.4	29.9	31.8	7.2
Hip Fracture	64	4.7	5.7	4.3	7.8	10.3	6.0	7.8	13.4	6.9
Sepsis	13	30.8	28.5	-----	46.2	36.9	-----	53.8	42.1	-----
PROCEDURES:										
Angioplasty	53	5.7	3.9	5.0	7.5	4.9	5.9	7.5	5.9	6.2
Coronary Artery Bypass Graft	48	12.5	5.7	-----	14.6	8.4	-----	18.7	9.6	-----
Initial Pacemaker Insertion	23	0.0	2.0	-----	4.3	3.7	-----	4.3	5.3	-----
Carotid Endarterectomy	10	0.0	1.0	-----	0.0	2.0	-----	0.0	3.1	-----
Hip Replacement/Reconstruction	78	2.6	2.3	2.4	2.6	4.2	3.3	2.6	5.7	4.0
Open Reduction of Hip Fracture	37	2.7	4.7	-----	8.1	8.8	-----	8.1	11.8	-----
Prostatectomy	91	0.0	0.6	1.0	0.0	1.4	1.7	1.1	2.5	2.0
Cholecystectomy	70	2.9	1.7	2.2	2.9	3.2	2.4	2.9	4.5	3.0
Hysterectomy	29	0.0	0.5	-----	0.0	1.2	-----	0.0	2.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



POUDRE VALLEY HOSPITAL
Medicare Provider Number: 060010

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.8 years
Proportion female	53.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	64.0 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	53.7 %
Admitted for emergency	34.6 %

COMORBIDITIES:

Cancer	6.0 %
Chronic cardiovascular disease	32.2 %
Chronic liver disease	0.4 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	14.9 %
Cerebrovascular degeneration	3.0 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	76.3%
State	10.7%
Outside State	13.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	233
Occupancy Rate	61.0 %
Ownership/Control	District/Authority
Medicare Discharges	26.9 %
Case Mix Index (CMI)	1.5044

STAFFING:

Total Number of Physicians	187
Percent of Physicians Board Certified Specialists	83.4 %
Medical Residents/Interns	12
Registered Nurses	253
Licensed Practical Nurses	16

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

PROWERS MEDICAL CENTER

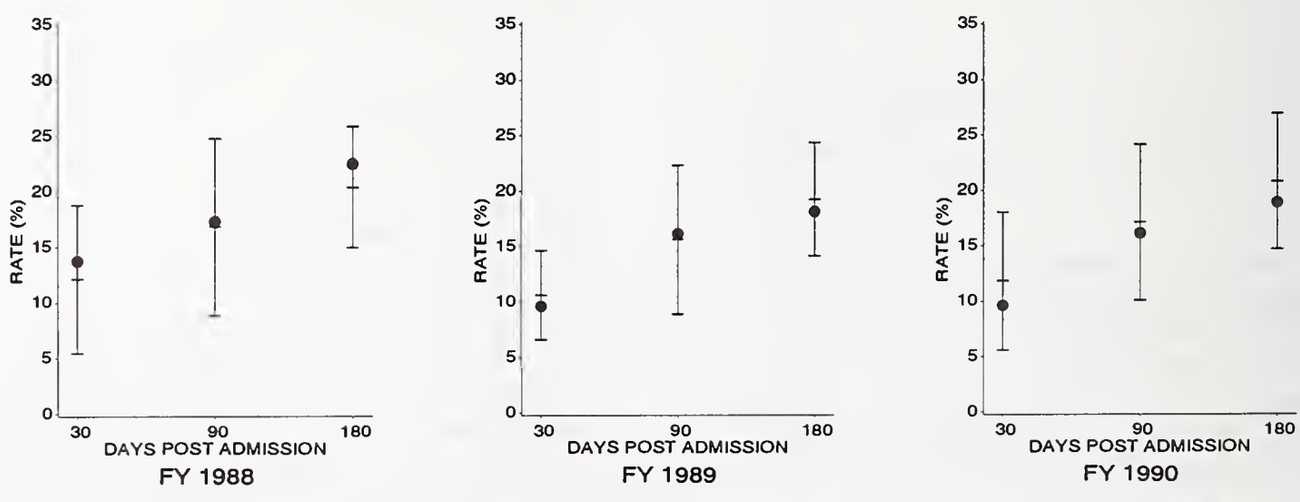
2101 SOUTH MEMORIAL DRIVE
LAMAR, CO 81052
Medicare Provider Number: 060007

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	249	9.6	11.8	3.1	16.1	17.1	3.5	18.9	20.8	3.1
CONDITIONS:										
Acute Myocardial Infarction	8	50.0	27.1	-----	50.0	29.6	-----	50.0	32.1	-----
Congestive Heart Failure	4	25.0	21.4	-----	50.0	35.3	-----	50.0	42.3	-----
Pneumonia/Influenza	43	0.0	15.2	-----	9.3	21.5	-----	11.6	25.4	-----
Chronic Obstructive Pulmonary Disease	12	8.3	6.9	-----	8.3	12.1	-----	16.7	17.0	-----
Transient Cerebral Ischemia	1	0.0	0.6	-----	0.0	1.6	-----	0.0	2.8	-----
Stroke	7	28.6	21.7	-----	28.6	31.0	-----	28.6	35.6	-----
Hip Fracture	4	0.0	3.8	-----	0.0	7.5	-----	0.0	10.3	-----
Sepsis	11	18.2	40.1	-----	27.3	46.1	-----	36.4	49.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	2	0.0	3.2	-----	0.0	6.6	-----	0.0	9.2	-----
Open Reduction of Hip Fracture	1	0.0	4.6	-----	0.0	9.3	-----	0.0	12.6	-----
Prostatectomy	0									
Cholecystectomy	11	0.0	2.8	-----	0.0	5.0	-----	9.1	6.3	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PROWERS MEDICAL CENTER
Medicare Provider Number: 060007

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.6 years
Proportion female	61.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	97.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	86.3 %

COMORBIDITIES:

Cancer	8.0 %
Chronic cardiovascular disease	34.1 %
Chronic liver disease	0.4 %
Chronic renal disease	5.6 %
Chronic pulmonary disease	21.7 %
Cerebrovascular degeneration	3.6 %
Diabetes mellitus	2.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	90.1%
State	8.4%
Outside State	1.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	40
Occupancy Rate	30.0 %
Ownership/Control	District/Authority
Medicare Discharges	39.3 %
Case Mix Index (CMI)	1.1850

STAFFING:

Total Number of Physicians	8
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	18
Licensed Practical Nurses	8

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

RANGELY DISTRICT HOSPITAL

510 SO WHITE AVE
RANGELY, CO 81648
Medicare Provider Number: 060073

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	19	26.3	13.5	-----	36.8	19.6	-----	36.8	23.9	-----
CONDITIONS:										
Acute Myocardial Infarction	1	100.0	14.6	-----	100.0	15.7	-----	100.0	17.3	-----
Congestive Heart Failure	2	0.0	14.0	-----	50.0	25.2	-----	50.0	32.5	-----
Pneumonia/Influenza	0									
Chronic Obstructive Pulmonary Disease	1	100.0	36.9	-----	100.0	59.8	-----	100.0	69.7	-----
Transient Cerebral Ischemia	0									
Stroke	3	33.3	16.6	-----	33.3	21.6	-----	33.3	24.6	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation
was not computed for one or more of the three fiscal years,
(1988, 1989, or 1990)

RANGELY DISTRICT HOSPITAL

Medicare Provider Number: 060073

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.5 years
Proportion female	52.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	26.3 %
Transferred from skilled nursing facility	5.3 %
Admitted for elective procedure	0.0 %
Admitted for emergency	68.4 %

COMORBIDITIES:

Cancer	0.0 %
Chronic cardiovascular disease	26.3 %
Chronic liver disease	5.3 %
Chronic renal disease	10.5 %
Chronic pulmonary disease	26.3 %
Cerebrovascular degeneration	5.3 %
Diabetes mellitus	21.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	74.2%
State	16.1%
Outside State	9.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.1 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	21
Occupancy Rate	38.0 %
Ownership/Control	District/Authority
Medicare Discharges	22.4 %
Case Mix Index (CMI)	1.0535

STAFFING:

Total Number of Physicians	3
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	8
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ROSE MEDICAL CENTER

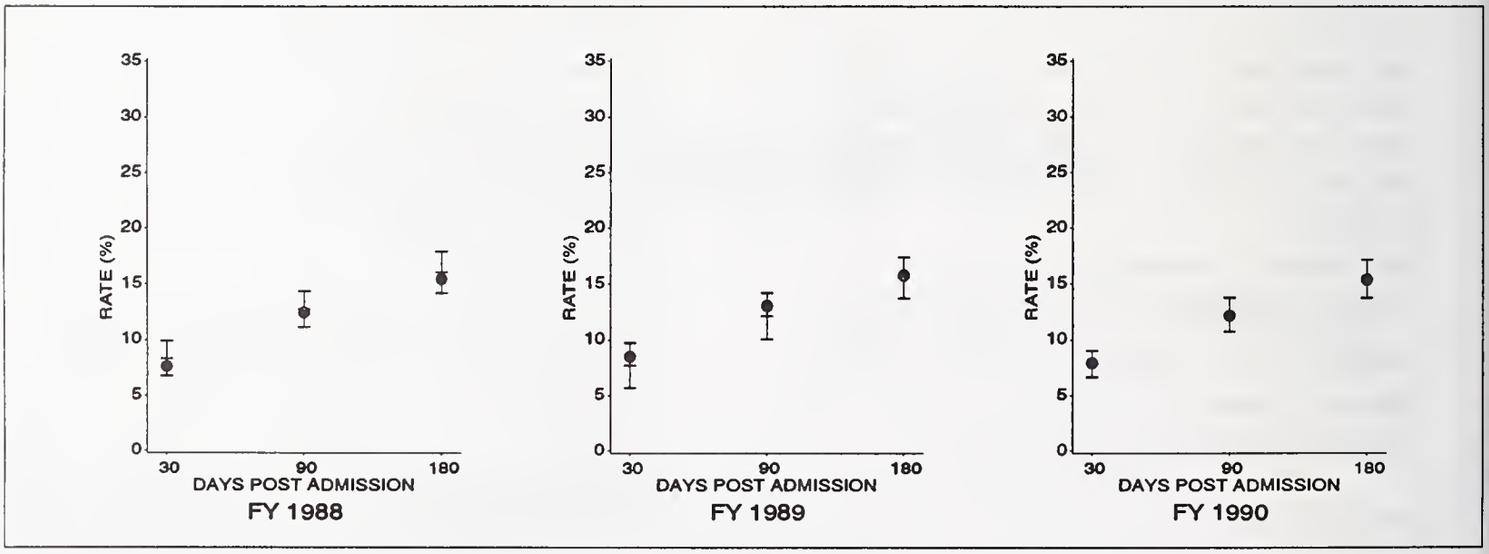
4567 E 9TH AVE
DENVER, CO 80220
Medicare Provider Number: 060032

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2017	7.9	7.8	0.6	12.1	12.2	0.8	15.3	15.4	0.9
CONDITIONS:										
Acute Myocardial Infarction	44	29.5	27.2	-----	36.4	30.3	-----	36.4	33.0	-----
Congestive Heart Failure	91	13.2	14.9	4.2	19.8	23.5	6.6	24.2	30.0	7.7
Pneumonia/Influenza	113	15.0	14.9	3.6	18.6	20.5	4.1	23.9	24.2	4.0
Chronic Obstructive Pulmonary Disease	26	3.8	4.7	-----	3.8	8.6	-----	11.5	11.9	-----
Transient Cerebral Ischemia	15	6.7	2.3	-----	20.0	5.0	-----	20.0	7.8	-----
Stroke	49	22.4	23.4	-----	24.5	29.7	-----	24.5	33.6	-----
Hip Fracture	65	4.6	6.8	3.8	10.8	12.2	4.3	13.8	15.9	4.9
Sepsis	12	33.3	31.2	-----	41.7	39.8	-----	50.0	45.2	-----
PROCEDURES:										
Angioplasty	17	0.0	2.6	-----	0.0	3.4	-----	0.0	4.2	-----
Coronary Artery Bypass Graft	12	0.0	3.7	-----	0.0	5.5	-----	0.0	6.5	-----
Initial Pacemaker Insertion	10	0.0	3.4	-----	0.0	6.2	-----	0.0	8.2	-----
Carotid Endarterectomy	4	0.0	1.1	-----	0.0	1.9	-----	0.0	2.9	-----
Hip Replacement/Reconstruction	74	1.4	2.4	2.0	2.7	4.3	2.7	5.4	5.7	3.2
Open Reduction of Hip Fracture	26	3.8	6.3	-----	3.8	11.6	-----	3.8	15.3	-----
Prostatectomy	82	0.0	1.0	1.4	1.2	2.5	2.0	1.2	4.2	2.9
Cholecystectomy	32	0.0	1.9	-----	3.1	3.3	-----	3.1	4.3	-----
Hysterectomy	21	0.0	0.5	-----	0.0	1.1	-----	0.0	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ROSE MEDICAL CENTER
Medicare Provider Number: 060032

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	59.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.2 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	28.4 %
Admitted for emergency	45.8 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	27.7 %
Chronic liver disease	0.3 %
Chronic renal disease	4.4 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	7.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	64.0%
State	29.5%
Outside State	6.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.8 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	266
Occupancy Rate	69.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	25.1 %
Case Mix Index (CMI)	1.3510

STAFFING:

Total Number of Physicians	355
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	339
Licensed Practical Nurses	13

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ROUTT MEMORIAL HOSPITAL INC

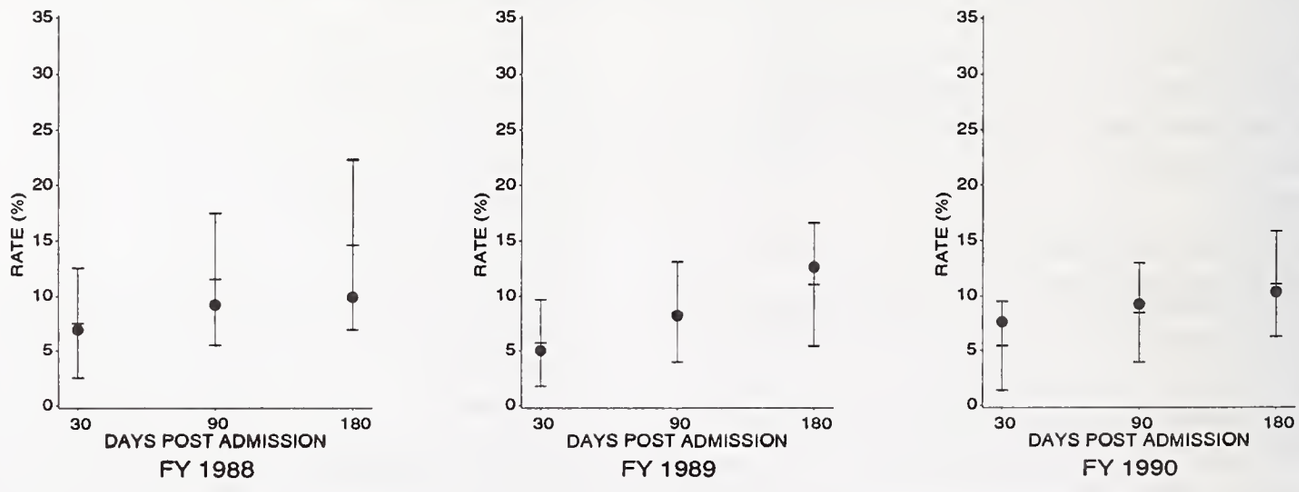
80 PARK AVE
STEAMBOAT SPRINGS, CO 80487
Medicare Provider Number: 060049

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	184	7.6	5.4	2.0	9.2	8.4	2.3	10.3	11.0	2.4
CONDITIONS:										
Acute Myocardial Infarction	3	33.3	11.2	-----	33.3	13.8	-----	33.3	16.2	-----
Congestive Heart Failure	6	33.3	13.4	-----	33.3	21.7	-----	33.3	28.3	-----
Pneumonia/Influenza	8	0.0	10.6	-----	0.0	14.3	-----	0.0	18.0	-----
Chronic Obstructive Pulmonary Disease	2	0.0	3.6	-----	0.0	6.5	-----	0.0	9.8	-----
Transient Cerebral Ischemia	3	0.0	1.6	-----	0.0	3.2	-----	0.0	5.0	-----
Stroke	4	0.0	17.5	-----	25.0	21.8	-----	25.0	25.4	-----
Hip Fracture	10	20.0	4.4	-----	20.0	8.4	-----	20.0	11.6	-----
Sepsis	1	100.0	21.3	-----	100.0	26.0	-----	100.0	30.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	4	25.0	3.5	-----	25.0	7.0	-----	25.0	9.7	-----
Open Reduction of Hip Fracture	5	20.0	4.2	-----	20.0	8.6	-----	20.0	12.3	-----
Prostatectomy	0									
Cholecystectomy	3	0.0	1.8	-----	0.0	2.8	-----	0.0	3.5	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ROUTT MEMORIAL HOSPITAL INC

Medicare Provider Number: 060049

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	56.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	61.4 %
Transferred from skilled nursing facility	0.5 %
Admitted for elective procedure	27.2 %
Admitted for emergency	38.0 %

COMORBIDITIES:

Cancer	3.8 %
Chronic cardiovascular disease	20.7 %
Chronic liver disease	0.0 %
Chronic renal disease	0.5 %
Chronic pulmonary disease	8.7 %
Cerebrovascular degeneration	4.3 %
Diabetes mellitus	3.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.6%
State	17.2%
Outside State	17.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	3.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	71
Occupancy Rate	80.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	19.4 %
Case Mix Index (CMI)	0.9874

STAFFING:

Total Number of Physicians	25
Percent of Physicians Board Certified Specialists	96.0 %
Medical Residents/Interns	0
Registered Nurses	37
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SAN LUIS VALLEY REGIONAL MEDICAL CENTER

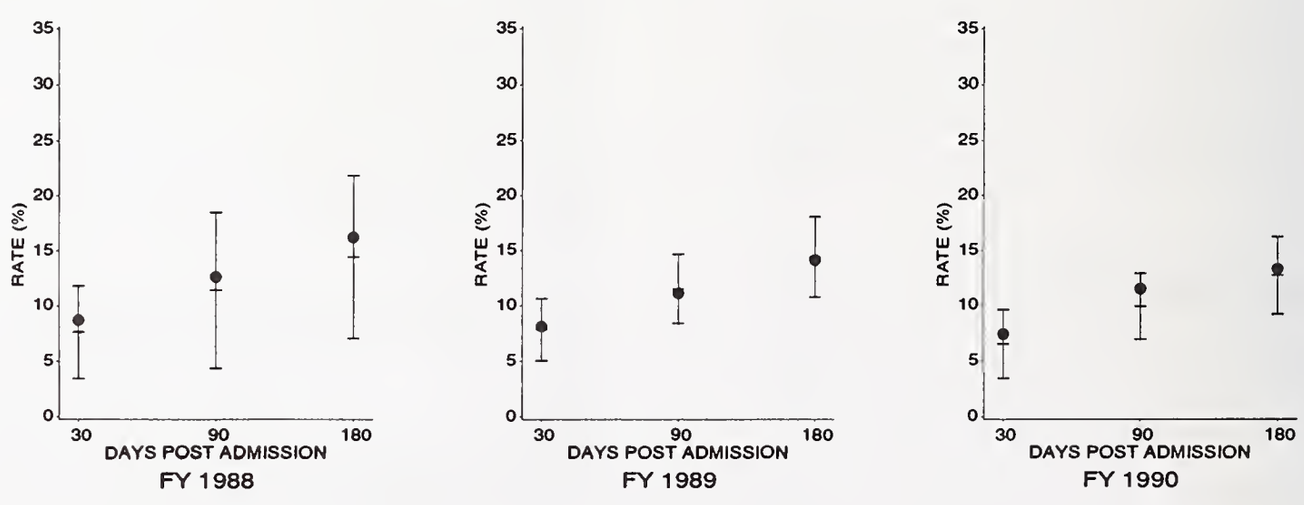
106 BLANCA
ALAMOSA, CO 81101
Medicare Provider Number: 060008

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	540	7.4	6.5	1.5	11.5	9.9	1.5	13.3	12.7	1.8
CONDITIONS:										
Acute Myocardial Infarction	17	23.5	18.0	-----	23.5	20.6	-----	23.5	23.3	-----
Congestive Heart Failure	14	7.1	13.6	-----	14.3	22.4	-----	14.3	29.1	-----
Pneumonia/Influenza	33	6.1	9.2	-----	15.2	13.1	-----	18.2	16.2	-----
Chronic Obstructive Pulmonary Disease	10	0.0	4.4	-----	0.0	8.6	-----	10.0	12.6	-----
Transient Cerebral Ischemia	7	0.0	1.8	-----	0.0	4.0	-----	0.0	6.4	-----
Stroke	22	18.2	17.7	-----	22.7	23.7	-----	22.7	27.4	-----
Hip Fracture	28	3.6	6.3	-----	14.3	11.8	-----	17.9	15.7	-----
Sepsis	7	42.9	15.7	-----	42.9	20.7	-----	42.9	24.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	14	7.1	3.1	-----	14.3	6.5	-----	21.4	9.4	-----
Open Reduction of Hip Fracture	17	5.9	5.7	-----	11.8	10.6	-----	11.8	14.1	-----
Prostatectomy	34	0.0	0.8	-----	2.9	2.0	-----	2.9	3.5	-----
Cholecystectomy	15	6.7	3.1	-----	13.3	6.5	-----	13.3	9.2	-----
Hysterectomy	6	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SAN LUIS VALLEY REGIONAL MEDICAL CENTER

Medicare Provider Number: 060008

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	
Average age at admission	74.2 years
Proportion female	49.4 %
ADMISSION SOURCES/TYPES:	
Referred by personal or HMO physician	59.4 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	50.2 %
Admitted for emergency	2.0 %

COMORBIDITIES:	
Cancer	3.3 %
Chronic cardiovascular disease	30.2 %
Chronic liver disease	0.7 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	18.7 %
Cerebrovascular degeneration	5.6 %
Diabetes mellitus	6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:	
County/City	36.4%
State	60.1%
Outside State	3.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:	
Hospital	4.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:	
Total Beds	70
Occupancy Rate	52.0 %
Ownership/Control	Church
Medicare Discharges	25.8 %
Case Mix Index (CMI)	1.0814
STAFFING:	
Total Number of Physicians	27
Percent of Physicians Board Certified Specialists	96.3 %
Medical Residents/Interns	0
Registered Nurses	30
Licensed Practical Nurses	32

SPECIALTY SERVICES:	
Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SEDGWICK COUNTY HOSPITAL

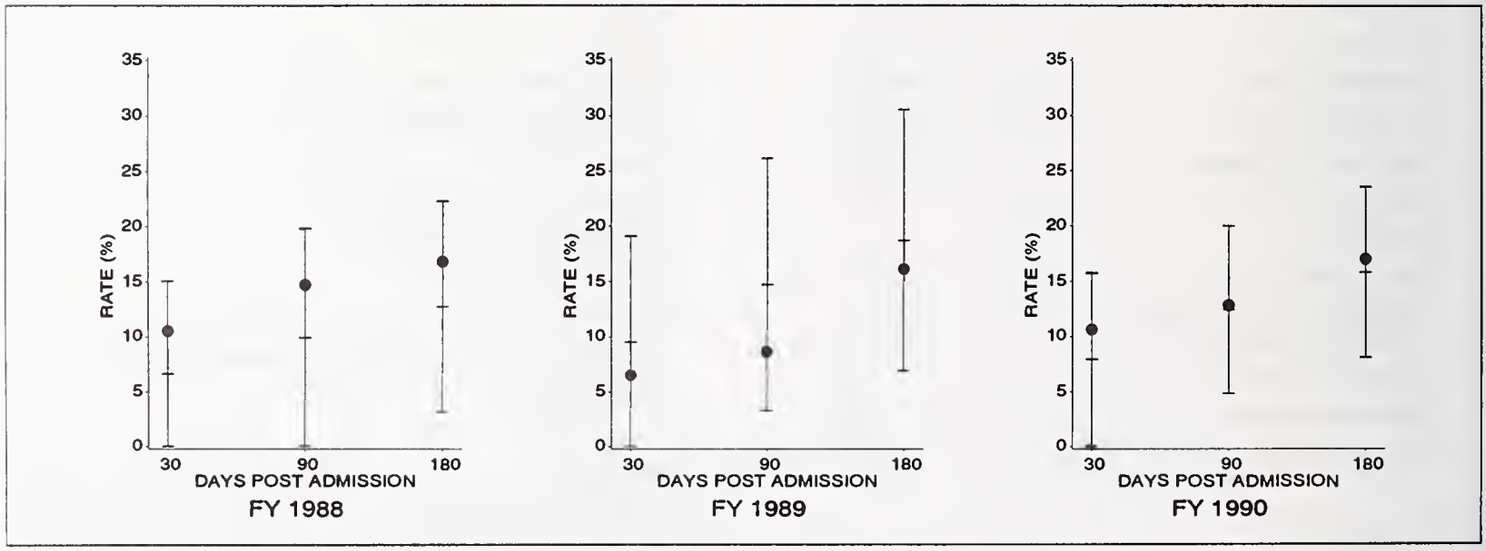
900 CEDAR ST
JULESBURG, CO 80737
Medicare Provider Number: 060052

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	94	10.6	7.9	3.9	12.8	12.4	3.8	17.0	15.8	3.9
CONDITIONS:										
Acute Myocardial Infarction	3	0.0	20.9	-----	0.0	24.2	-----	0.0	28.3	-----
Congestive Heart Failure	7	14.3	16.3	-----	14.3	27.3	-----	14.3	33.9	-----
Pneumonia/Influenza	5	20.0	21.7	-----	40.0	30.1	-----	40.0	34.9	-----
Chronic Obstructive Pulmonary Disease	1	0.0	7.9	-----	0.0	12.0	-----	0.0	16.5	-----
Transient Cerebral Ischemia	1	0.0	1.6	-----	0.0	3.4	-----	0.0	5.4	-----
Stroke	4	75.0	24.6	-----	75.0	36.6	-----	75.0	43.2	-----
Hip Fracture	0									
Sepsis	1	0.0	23.6	-----	0.0	36.9	-----	0.0	42.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	7	0.0	0.6	-----	0.0	1.6	-----	0.0	2.9	-----
Cholecystectomy	2	0.0	2.9	-----	0.0	6.8	-----	0.0	11.1	-----
Hysterectomy	1	0.0	0.1	-----	0.0	0.2	-----	0.0	0.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SEDGWICK COUNTY HOSPITAL
Medicare Provider Number: 060052

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.3 years
Proportion female	56.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	96.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	6.4 %
Chronic cardiovascular disease	39.4 %
Chronic liver disease	0.0 %
Chronic renal disease	5.3 %
Chronic pulmonary disease	11.7 %
Cerebrovascular degeneration	1.1 %
Diabetes mellitus	9.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.4%
State	3.4%
Outside State	12.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	58
Occupancy Rate	58.0 %
Ownership/Control	Local Government
Medicare Discharges	60.9 %
Case Mix Index (CMI)	1.0215

STAFFING:

Total Number of Physicians	2
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	5
Licensed Practical Nurses	1

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

SOUTHEAST COLORADO HOSPITAL

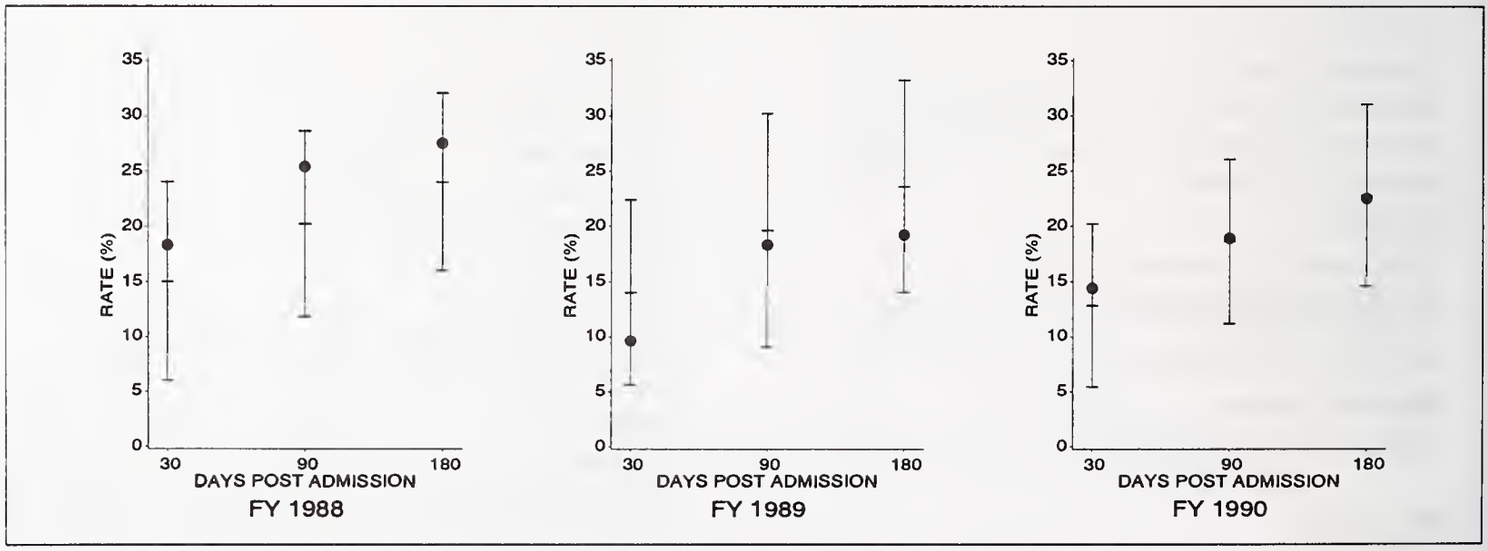
373 E 10TH AVE
SPRINGFIELD, CO 81073
Medicare Provider Number: 060085

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	111	14.4	12.8	3.7	18.9	18.6	3.7	22.5	22.8	4.1
CONDITIONS:										
Acute Myocardial Infarction	10	50.0	27.2	-----	50.0	29.5	-----	50.0	32.0	-----
Congestive Heart Failure	7	0.0	12.9	-----	14.3	20.5	-----	14.3	26.3	-----
Pneumonia/Influenza	11	9.1	13.1	-----	18.2	17.6	-----	18.2	20.9	-----
Chronic Obstructive Pulmonary Disease	3	0.0	9.5	-----	0.0	19.3	-----	0.0	26.5	-----
Transient Cerebral Ischemia	2	0.0	0.9	-----	0.0	2.3	-----	0.0	4.2	-----
Stroke	6	16.7	31.7	-----	33.3	42.2	-----	33.3	47.9	-----
Hip Fracture	3	0.0	16.0	-----	33.3	26.0	-----	33.3	31.6	-----
Sepsis	2	0.0	17.8	-----	0.0	26.9	-----	0.0	33.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	1	0.0	4.0	-----	100.0	9.0	-----	100.0	13.2	-----
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTHEAST COLORADO HOSPITAL

Medicare Provider Number: 060085

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	78.8 years
Proportion female	57.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.3 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.9 %
Admitted for emergency	62.2 %

COMORBIDITIES:

Cancer	7.2 %
Chronic cardiovascular disease	52.3 %
Chronic liver disease	0.9 %
Chronic renal disease	3.6 %
Chronic pulmonary disease	18.0 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	5.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	91.9%
State	5.2%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	65
Occupancy Rate	67.0 %
Ownership/Control	District/Authority
Medicare Discharges	53.7 %
Case Mix Index (CMI)	1.0267

STAFFING:

Total Number of Physicians	2
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	4
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SOUTHWEST MEMORIAL HOSPITAL

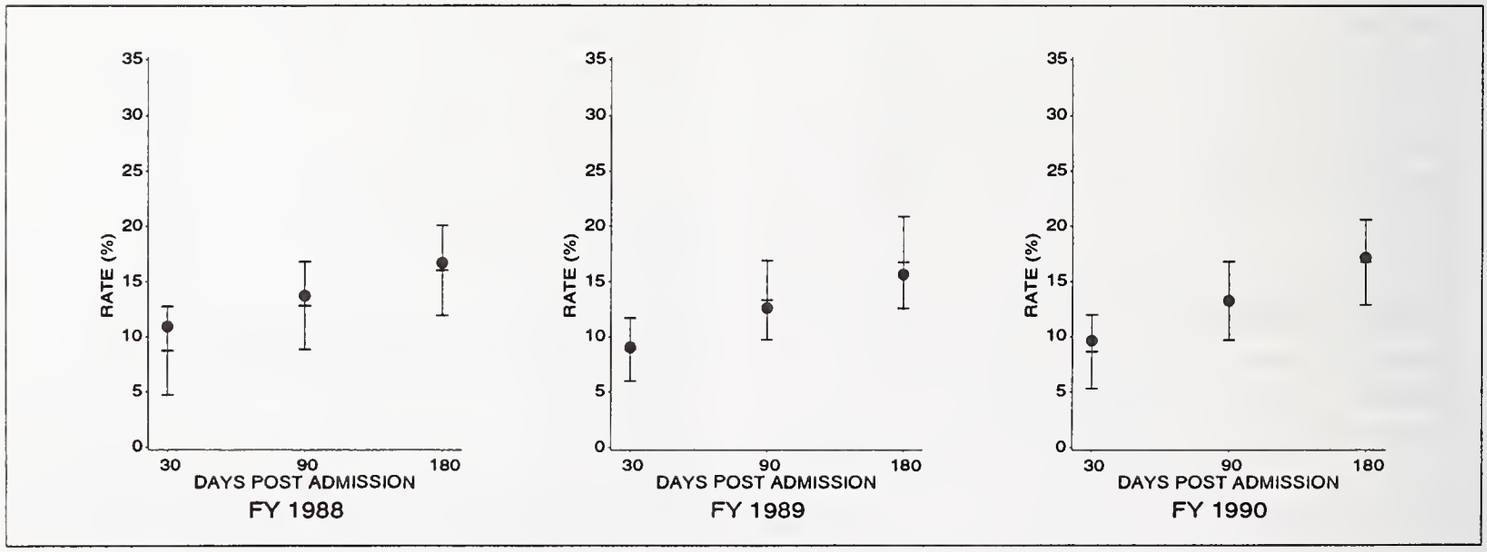
1311 NORTH MILDRED RD
CORTEZ, CO 81321
Medicare Provider Number: 060018

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	385	9.6	8.6	1.7	13.2	13.2	1.8	17.1	16.7	1.9
CONDITIONS:										
Acute Myocardial Infarction	14	14.3	18.5	-----	14.3	21.5	-----	21.4	24.2	-----
Congestive Heart Failure	15	6.7	12.6	-----	6.7	20.4	-----	6.7	25.8	-----
Pneumonia/Influenza	58	10.3	12.2	4.7	17.2	16.8	5.0	20.7	20.0	5.3
Chronic Obstructive Pulmonary Disease	15	13.3	7.2	-----	13.3	12.3	-----	20.0	16.2	-----
Transient Cerebral Ischemia	2	0.0	2.4	-----	0.0	6.5	-----	0.0	11.8	-----
Stroke	13	23.1	23.7	-----	38.5	32.2	-----	46.2	36.6	-----
Hip Fracture	10	0.0	7.6	-----	10.0	14.1	-----	10.0	18.9	-----
Sepsis	1	0.0	1.9	-----	100.0	3.0	-----	100.0	4.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	0.8	-----	0.0	1.9	-----	0.0	3.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	1	0.0	3.2	-----	0.0	6.5	-----	0.0	9.1	-----
Open Reduction of Hip Fracture	9	0.0	5.9	-----	0.0	11.2	-----	0.0	15.2	-----
Prostatectomy	1	0.0	1.2	-----	0.0	3.4	-----	0.0	6.2	-----
Cholecystectomy	17	5.9	2.3	-----	5.9	4.2	-----	5.9	5.6	-----
Hysterectomy	3	0.0	0.3	-----	0.0	0.8	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTHWEST MEMORIAL HOSPITAL
Medicare Provider Number: 060018

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	56.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	43.1 %
Admitted for emergency	52.5 %

COMORBIDITIES:

Cancer	6.0 %
Chronic cardiovascular disease	30.6 %
Chronic liver disease	0.5 %
Chronic renal disease	0.8 %
Chronic pulmonary disease	24.9 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	3.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	80.8%
State	5.2%
Outside State	14.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	137
Occupancy Rate	69.0 %
Ownership/Control	District/Authority
Medicare Discharges	40.9 %
Case Mix Index (CMI)	1.1232

STAFFING:

Total Number of Physicians	19
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	39
Licensed Practical Nurses	6

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

ST ANTHONY HOSPITAL SYSTEMS

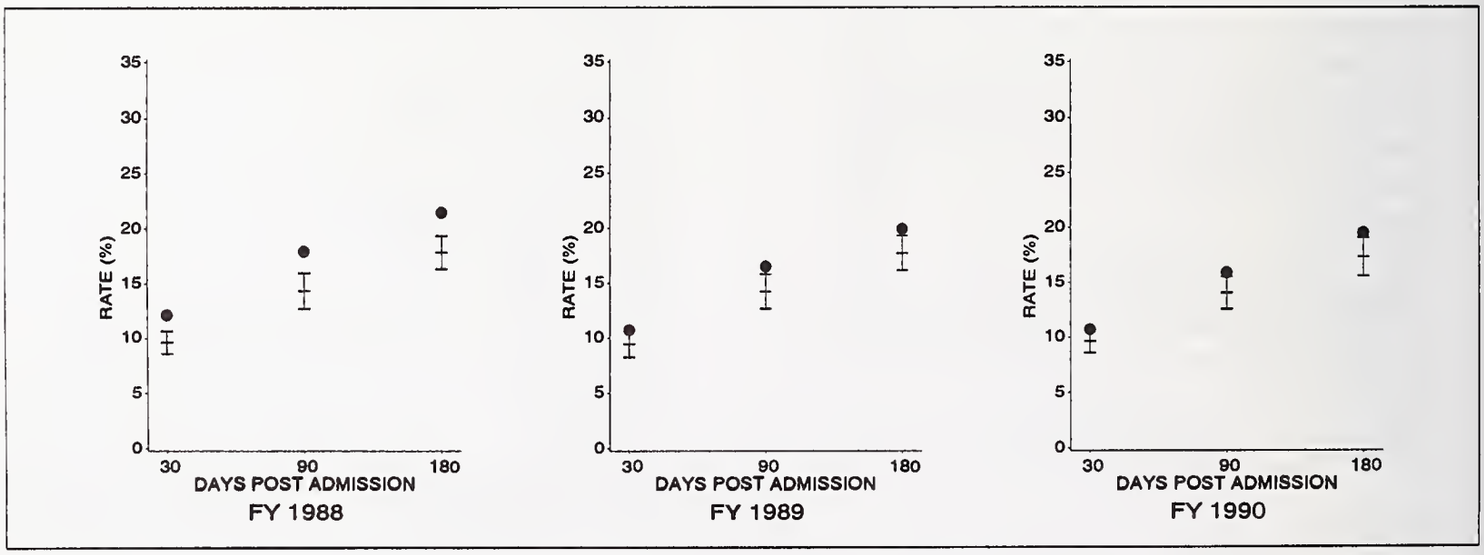
4231 W 16TH AVE
DENVER, CO 80204
Medicare Provider Number: 060015

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4661	10.7	9.6	0.5	15.9	14.0	0.8	19.5	17.3	0.9
CONDITIONS:										
Acute Myocardial Infarction	137	16.8	23.6	5.7	19.7	26.1	5.7	21.2	28.6	6.2
Congestive Heart Failure	186	17.2	13.8	4.5	27.4	21.8	6.8	33.3	27.9	7.4
Pneumonia/Influenza	232	18.5	15.9	3.1	22.8	22.1	2.8	27.2	26.1	3.1
Chronic Obstructive Pulmonary Disease	97	13.4	8.6	3.7	18.6	14.7	4.4	27.8	19.1	5.8
Transient Cerebral Ischemia	52	0.0	1.5	2.1	0.0	3.3	4.3	3.8	5.5	4.5
Stroke	147	24.5	24.2	4.0	30.6	30.4	6.2	31.3	33.8	4.4
Hip Fracture	153	11.8	7.0	3.8	18.3	12.4	4.8	21.6	16.1	4.8
Sepsis	90	27.8	29.2	6.2	35.6	36.1	5.1	44.4	40.4	7.2
PROCEDURES:										
Angioplasty	44	2.3	4.7	-----	2.3	5.5	-----	2.3	6.5	-----
Coronary Artery Bypass Graft	57	10.5	5.7	6.6	12.3	7.9	6.4	12.3	8.8	6.3
Initial Pacemaker Insertion	16	0.0	3.6	-----	0.0	7.1	-----	0.0	10.1	-----
Carotid Endarterectomy	13	0.0	1.2	-----	0.0	2.3	-----	0.0	3.3	-----
Hip Replacement/Reconstruction	99	7.1	3.3	3.6	11.1	5.8	5.1	12.1	7.7	5.3
Open Reduction of Hip Fracture	78	10.3	6.8	5.4	16.7	12.3	6.8	21.8	16.2	7.5
Prostatectomy	186	1.1	1.1	1.1	3.8	2.6	1.7	6.5	4.5	2.3
Cholecystectomy	109	6.4	2.9	3.4	11.0	5.1	5.0	11.0	6.5	4.4
Hysterectomy	30	0.0	0.6	-----	0.0	1.4	-----	0.0	2.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST ANTHONY HOSPITAL SYSTEMS

Medicare Provider Number: 060015

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.5 years
Proportion female	56.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.0 %
Transferred from skilled nursing facility	0.7 %
Admitted for elective procedure	20.9 %
Admitted for emergency	56.1 %

COMORBIDITIES:

Cancer	6.0 %
Chronic cardiovascular disease	33.7 %
Chronic liver disease	1.1 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	18.3 %
Cerebrovascular degeneration	5.7 %
Diabetes mellitus	5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	37.7%
State	57.0%
Outside State	5.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.8 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	1250
Occupancy Rate	68.0 %
Ownership/Control	Church
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.3673

STAFFING:

Total Number of Physicians	684
Percent of Physicians Board Certified Specialists	74.0 %
Medical Residents/Interns	26
Registered Nurses	663
Licensed Practical Nurses	110

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ST FRANCIS HOSPITAL SYSTEMS

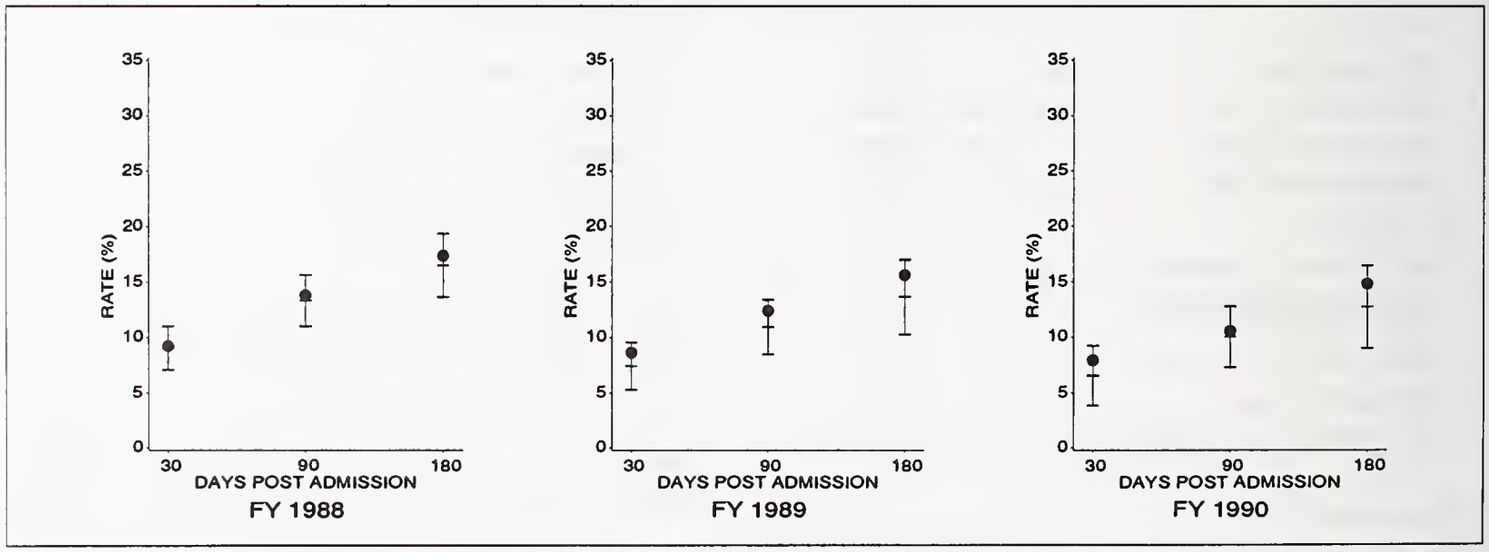
800 E PIKES PEAK AVE
COLORADO SPRINGS, CO 80903
Medicare Provider Number: 060017

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	697	7.9	6.5	1.3	10.5	10.0	1.4	14.8	12.7	1.9
CONDITIONS:										
Acute Myocardial Infarction	8	62.5	28.6	-----	75.0	31.8	-----	75.0	34.6	-----
Congestive Heart Failure	24	8.3	12.9	-----	12.5	20.4	-----	20.8	25.9	-----
Pneumonia/Influenza	33	12.1	10.0	-----	15.2	13.8	-----	21.2	16.2	-----
Chronic Obstructive Pulmonary Disease	13	7.7	6.4	-----	15.4	11.6	-----	23.1	15.4	-----
Transient Cerebral Ischemia	10	0.0	0.9	-----	0.0	2.1	-----	0.0	3.7	-----
Stroke	22	18.2	21.8	-----	27.3	26.7	-----	27.3	30.1	-----
Hip Fracture	22	4.5	5.1	-----	4.5	9.6	-----	4.5	12.7	-----
Sepsis	4	50.0	30.1	-----	100.0	44.5	-----	100.0	51.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	2	0.0	0.5	-----	0.0	1.0	-----	0.0	1.5	-----
Hip Replacement/Reconstruction	17	0.0	1.6	-----	0.0	3.1	-----	0.0	4.3	-----
Open Reduction of Hip Fracture	9	0.0	4.5	-----	0.0	9.1	-----	0.0	12.6	-----
Prostatectomy	16	0.0	0.8	-----	6.3	2.1	-----	12.5	3.7	-----
Cholecystectomy	27	7.4	2.6	-----	7.4	4.7	-----	11.1	6.0	-----
Hysterectomy	7	0.0	0.3	-----	0.0	0.6	-----	0.0	1.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST FRANCIS HOSPITAL SYSTEMS

Medicare Provider Number: 060017

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.8 years
Proportion female	56.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.2 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	44.5 %
Admitted for emergency	0.4 %

COMORBIDITIES:

Cancer	4.3 %
Chronic cardiovascular disease	22.5 %
Chronic liver disease	0.7 %
Chronic renal disease	1.4 %
Chronic pulmonary disease	14.1 %
Cerebrovascular degeneration	3.6 %
Diabetes mellitus	5.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.9%
State	10.7%
Outside State	6.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds	204
Ownership/Control	Church
Case Mix Index (CMI)	1.2262

STAFFING:

Medical Residents/Interns	0
Registered Nurses	155
Licensed Practical Nurses	3

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST JOSEPH HOSPITAL

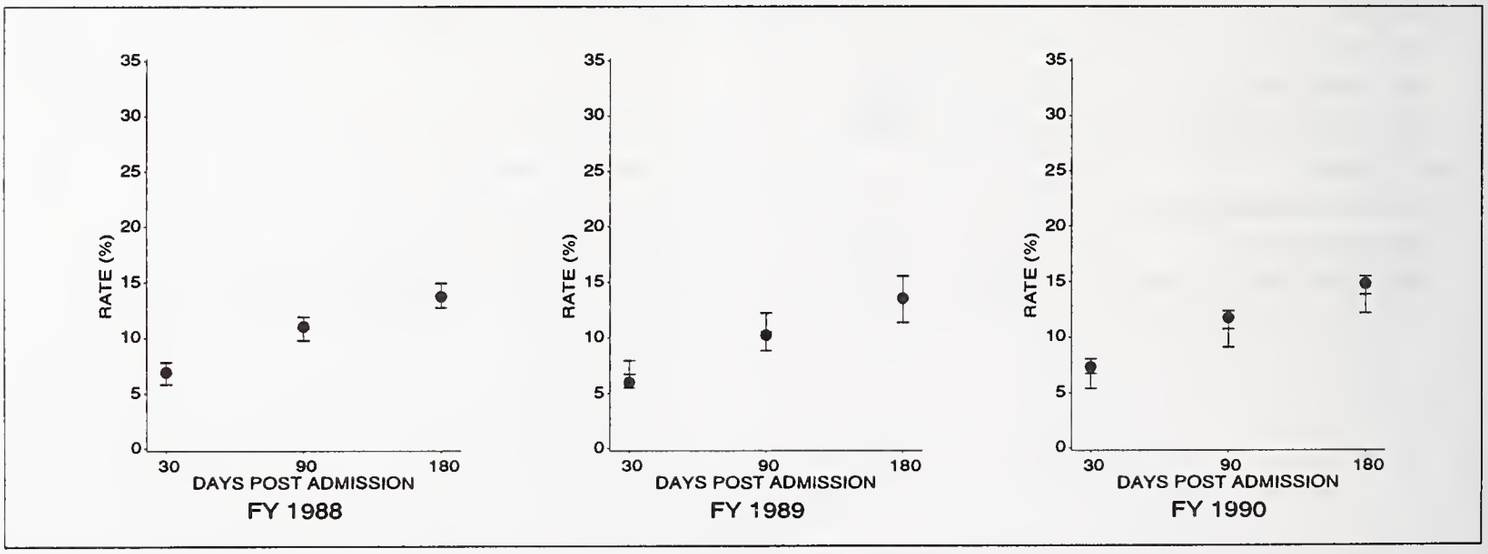
1835 FRANKLIN ST
DENVER, CO 80218
Medicare Provider Number: 060028

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4013	7.3	6.7	0.7	11.7	10.7	0.8	14.8	13.8	0.8
CONDITIONS:										
Acute Myocardial Infarction	145	15.9	18.8	5.3	19.3	22.0	5.5	22.1	24.9	6.2
Congestive Heart Failure	136	11.8	12.7	3.0	20.6	20.3	3.5	28.7	26.2	4.4
Pneumonia/Influenza	124	12.1	11.3	3.1	16.9	16.0	3.4	22.6	19.4	4.9
Chronic Obstructive Pulmonary Disease	90	7.8	7.6	3.5	18.9	13.4	5.3	25.6	17.8	6.9
Transient Cerebral Ischemia	25	0.0	1.3	-----	8.0	3.0	-----	8.0	5.0	-----
Stroke	92	19.6	18.9	4.4	28.3	25.0	5.7	30.4	28.8	4.9
Hip Fracture	104	10.6	6.2	3.9	14.4	11.1	3.7	20.2	14.6	5.5
Sepsis	21	38.1	22.5	-----	42.9	30.8	-----	42.9	36.3	-----
PROCEDURES:										
Angioplasty	32	3.1	3.7	-----	3.1	4.6	-----	3.1	5.6	-----
Coronary Artery Bypass Graft	81	4.9	5.3	2.7	6.2	7.6	3.2	7.4	8.5	3.2
Initial Pacemaker Insertion	12	8.3	2.2	-----	8.3	4.5	-----	25.0	6.9	-----
Carotid Endarterectomy	13	0.0	2.0	-----	0.0	3.7	-----	7.7	5.3	-----
Hip Replacement/Reconstruction	112	3.6	2.6	1.6	5.4	5.0	2.1	7.1	6.7	2.6
Open Reduction of Hip Fracture	44	9.1	5.4	-----	13.6	10.3	-----	20.5	13.9	-----
Prostatectomy	135	0.0	0.7	1.0	1.5	1.6	1.4	2.2	2.8	1.7
Cholecystectomy	75	4.0	2.1	2.5	6.7	4.0	4.1	8.0	5.5	4.9
Hysterectomy	37	0.0	1.1	-----	0.0	2.5	-----	0.0	3.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST JOSEPH HOSPITAL
Medicare Provider Number: 060028

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.9 years
Proportion female	54.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	87.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	23.8 %
Admitted for emergency	18.0 %

COMORBIDITIES:

Cancer	8.6 %
Chronic cardiovascular disease	32.1 %
Chronic liver disease	0.8 %
Chronic renal disease	2.4 %
Chronic pulmonary disease	15.6 %
Cerebrovascular degeneration	4.1 %
Diabetes mellitus	5.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	47.9%
State	44.7%
Outside State	7.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	488
Occupancy Rate	69.0 %
Ownership/Control	Church
Medicare Discharges	12.6 %
Case Mix Index (CMI)	1.3480

STAFFING:

Total Number of Physicians	534
Percent of Physicians Board Certified Specialists	70.8 %
Medical Residents/Interns	93
Registered Nurses	548
Licensed Practical Nurses	34

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST JOSEPH HOSPITAL OF DEL NORTE INC

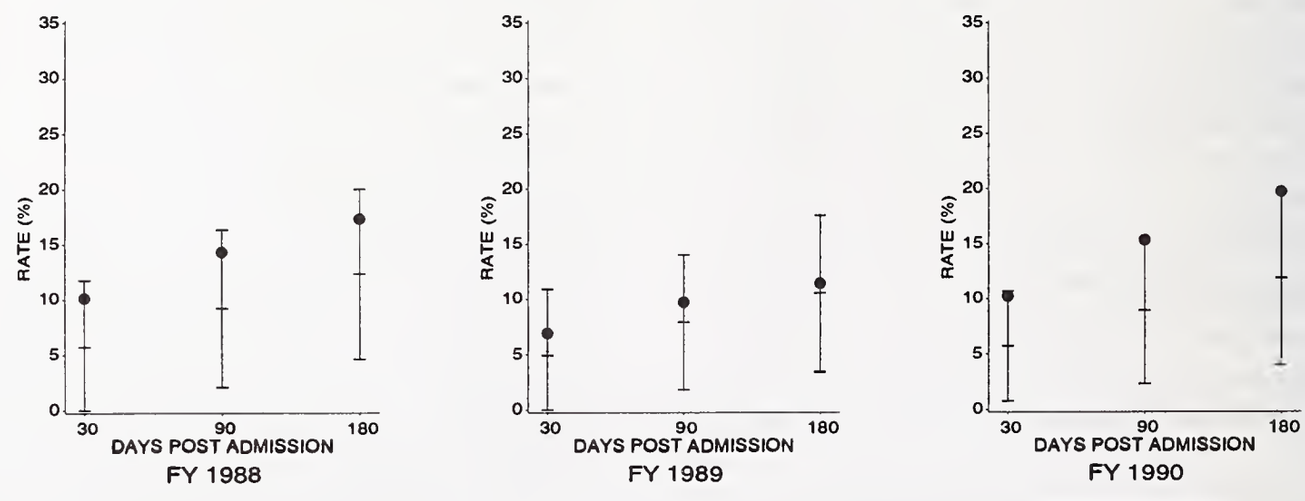
1280 GRANDE AVE
DEL NORTE, CO 81132
Medicare Provider Number: 060072

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	157	10.2	5.7	2.5	15.3	8.9	3.3	19.7	11.8	3.9
CONDITIONS:										
Acute Myocardial Infarction	8	12.5	13.1	-----	12.5	16.8	-----	12.5	20.2	-----
Congestive Heart Failure	3	0.0	12.5	-----	0.0	19.4	-----	33.3	25.7	-----
Pneumonia/Influenza	19	5.3	11.8	-----	26.3	16.4	-----	36.8	19.9	-----
Chronic Obstructive Pulmonary Disease	5	20.0	5.1	-----	20.0	9.6	-----	20.0	13.9	-----
Transient Cerebral Ischemia	5	40.0	1.5	-----	60.0	4.0	-----	60.0	7.2	-----
Stroke	0									
Hip Fracture	1	0.0	11.6	-----	0.0	25.9	-----	0.0	39.9	-----
Sepsis	2	0.0	19.9	-----	0.0	35.7	-----	0.0	44.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	3	33.3	2.2	-----	33.3	4.1	-----	33.3	5.3	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST JOSEPH HOSPITAL OF DEL NORTE INC

Medicare Provider Number: 060072

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.5 years
Proportion female	51.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	98.7 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	98.7 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	3.2 %
Chronic cardiovascular disease	33.8 %
Chronic liver disease	0.6 %
Chronic renal disease	1.3 %
Chronic pulmonary disease	12.7 %
Cerebrovascular degeneration	5.7 %
Diabetes mellitus	4.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	61.5%
State	30.8%
Outside State	7.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.0 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	65
Occupancy Rate	66.0 %
Ownership/Control	Church
Medicare Discharges	40.3 %
Case Mix Index (CMI)	0.9454

STAFFING:

Total Number of Physicians	10
Percent of Physicians Board Certified Specialists	90.0 %
Medical Residents/Interns	0
Registered Nurses	7
Licensed Practical Nurses	4

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used In calculating mortality rates**

ST MARY CORWIN HOSPITAL

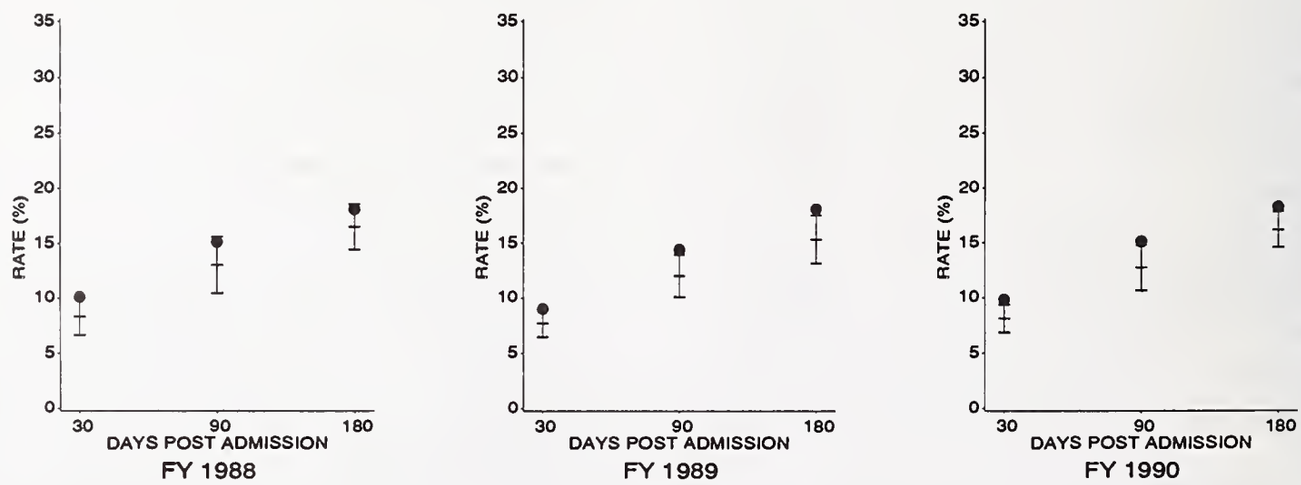
1008 MINNEQUA AVE
PUEBLO, CO 81004
Medicare Provider Number: 060012

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2971	9.8	8.1	0.6	15.1	12.7	1.0	18.3	16.2	0.8
CONDITIONS:										
Acute Myocardial Infarction	74	18.9	22.3	5.1	21.6	25.0	5.5	21.6	27.5	5.8
Congestive Heart Failure	126	17.5	14.2	4.3	28.6	22.4	5.3	35.7	28.6	5.9
Pneumonia/Influenza	110	23.6	17.4	5.3	33.6	23.7	6.5	37.3	28.1	6.6
Chronic Obstructive Pulmonary Disease	38	0.0	6.7	-----	0.0	11.5	-----	2.6	15.3	-----
Transient Cerebral Ischemia	52	0.0	1.2	2.5	5.8	3.0	3.0	9.6	5.2	4.5
Stroke	104	21.2	18.2	4.5	26.0	24.6	6.4	30.8	28.2	5.6
Hip Fracture	102	6.9	7.5	3.9	12.7	13.0	5.1	14.7	16.7	4.4
Sepsis	25	40.0	26.2	-----	44.0	33.4	-----	44.0	37.9	-----
PROCEDURES:										
Angioplasty	36	2.8	2.2	-----	2.8	3.0	-----	2.8	3.7	-----
Coronary Artery Bypass Graft	39	0.0	6.1	-----	0.0	9.0	-----	2.6	10.5	-----
Initial Pacemaker Insertion	17	5.9	2.6	-----	5.9	5.6	-----	11.8	8.6	-----
Carotid Endarterectomy	10	10.0	1.2	-----	10.0	2.4	-----	10.0	3.7	-----
Hip Replacement/Reconstruction	86	4.7	3.7	2.2	8.1	6.6	3.1	9.3	8.9	3.6
Open Reduction of Hip Fracture	39	7.7	5.9	-----	7.7	10.6	-----	10.3	13.9	-----
Prostatectomy	156	0.0	0.7	0.9	1.3	1.6	1.1	1.9	2.8	1.6
Cholecystectomy	87	3.4	2.3	2.7	6.9	4.3	3.2	8.0	5.9	3.6
Hysterectomy	28	0.0	0.7	-----	0.0	1.6	-----	0.0	2.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARY CORWIN HOSPITAL
Medicare Provider Number: 060012

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.4 years
Proportion female	53.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	53.5 %
Transferred from skilled nursing facility	3.1 %
Admitted for elective procedure	50.9 %
Admitted for emergency	40.8 %

COMORBIDITIES:

Cancer	9.2 %
Chronic cardiovascular disease	33.5 %
Chronic liver disease	1.3 %
Chronic renal disease	4.4 %
Chronic pulmonary disease	16.7 %
Cerebrovascular degeneration	4.3 %
Diabetes mellitus	7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	76.3%
State	20.3%
Outside State	3.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.1 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	308
Occupancy Rate	69.0 %
Ownership/Control	Church
Medicare Discharges	37.3 %
Case Mix Index (CMI)	1.3558

STAFFING:

Total Number of Physicians	185
Percent of Physicians Board Certified Specialists	81.6 %
Medical Residents/Interns	17
Registered Nurses	285
Licensed Practical Nurses	28

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ST MARYS HOSPITAL MEDICAL CENTER

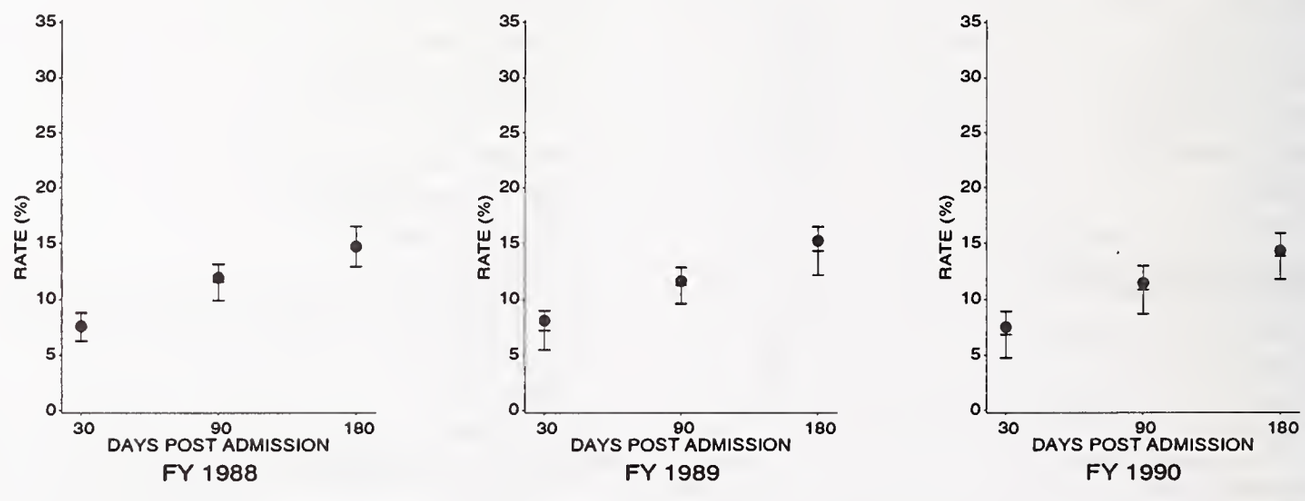
7TH AND PATTERSON RD
GRAND JUNCTION, CO 81501
Medicare Provider Number: 060023

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2386	7.5	6.8	1.0	11.4	10.8	1.1	14.3	13.8	1.0
CONDITIONS:										
Acute Myocardial Infarction	77	27.3	19.7	6.7	29.9	22.9	6.6	29.9	25.4	6.2
Congestive Heart Failure	92	16.3	13.0	5.0	20.7	20.3	4.2	26.1	26.1	4.7
Pneumonia/Influenza	99	9.1	10.7	3.4	14.1	15.5	4.1	18.2	18.8	5.8
Chronic Obstructive Pulmonary Disease	35	8.6	6.5	-----	8.6	11.8	-----	20.0	16.0	-----
Transient Cerebral Ischemia	38	7.9	1.3	-----	13.2	3.0	-----	13.2	5.0	-----
Stroke	86	4.7	16.0	5.7	11.6	21.8	6.9	14.0	25.4	6.7
Hip Fracture	73	5.5	5.1	3.0	6.8	9.7	4.8	8.2	13.2	5.7
Sepsis	19	31.6	25.8	-----	42.1	36.6	-----	52.6	42.3	-----
PROCEDURES:										
Angioplasty	26	0.0	2.0	-----	0.0	2.8	-----	0.0	3.7	-----
Coronary Artery Bypass Graft	27	11.1	5.3	-----	11.1	7.1	-----	11.1	8.0	-----
Initial Pacemaker Insertion	12	8.3	3.8	-----	8.3	7.2	-----	8.3	9.9	-----
Carotid Endarterectomy	14	7.1	1.3	-----	7.1	2.4	-----	7.1	3.8	-----
Hip Replacement/Reconstruction	95	1.1	1.4	1.5	1.1	2.9	2.1	2.1	4.2	2.5
Open Reduction of Hip Fracture	36	5.6	4.3	-----	5.6	8.4	-----	8.3	11.7	-----
Prostatectomy	94	0.0	0.6	0.9	0.0	1.5	1.5	0.0	2.7	2.2
Cholecystectomy	60	3.3	2.8	3.0	5.0	5.2	3.7	6.7	6.8	3.7
Hysterectomy	20	0.0	0.4	-----	0.0	1.0	-----	0.0	1.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HOSPITAL MEDICAL CENTER

Medicare Provider Number: 060023

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.5 years
Proportion female	53.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	55.3 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	88.4 %
Admitted for emergency	8.9 %

COMORBIDITIES:

Cancer	8.2 %
Chronic cardiovascular disease	32.0 %
Chronic liver disease	0.8 %
Chronic renal disease	2.7 %
Chronic pulmonary disease	14.9 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	5.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	71.7%
State	21.9%
Outside State	6.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	214
Occupancy Rate	64.0 %
Ownership/Control	Church
Medicare Discharges	32.0 %
Case Mix Index (CMI)	1.4767

STAFFING:

Total Number of Physicians	149
Percent of Physicians Board Certified Specialists	86.6 %
Medical Residents/Interns	12
Registered Nurses	282
Licensed Practical Nurses	29

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST THOMAS MORE/ST JOSEPH HOSPITAL

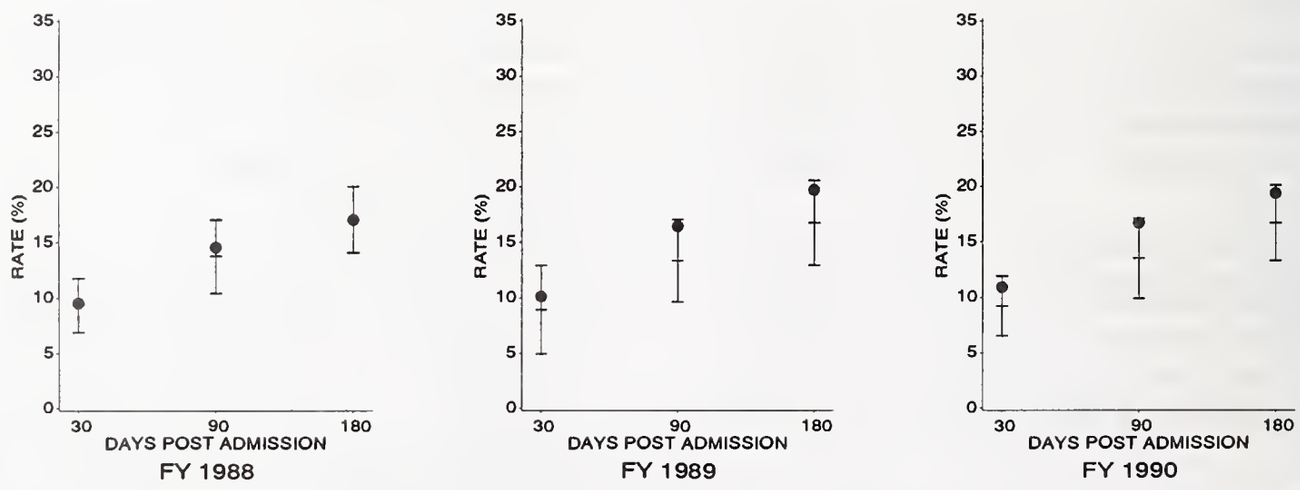
1019 SHERIDAN
CANON CITY, CO 81212
Medicare Provider Number: 060016

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	888	10.9	9.2	1.3	16.7	13.5	1.8	19.4	16.7	1.7
CONDITIONS:										
Acute Myocardial Infarction	33	42.4	30.4	-----	42.4	32.8	-----	45.5	35.3	-----
Congestive Heart Failure	33	12.1	16.4	-----	24.2	25.8	-----	24.2	32.0	-----
Pneumonia/Influenza	65	18.5	14.0	5.2	26.2	18.8	5.5	32.3	22.3	6.3
Chronic Obstructive Pulmonary Disease	17	11.8	5.7	-----	11.8	10.3	-----	23.5	14.3	-----
Transient Cerebral Ischemia	16	0.0	2.2	-----	0.0	5.3	-----	6.3	9.0	-----
Stroke	39	30.8	16.9	-----	35.9	22.9	-----	43.6	26.6	-----
Hip Fracture	19	21.1	8.3	-----	42.1	15.1	-----	42.1	19.6	-----
Sepsis	21	19.0	26.4	-----	33.3	33.9	-----	33.3	39.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	2	0.0	0.8	-----	0.0	1.6	-----	0.0	2.4	-----
Hip Replacement/Reconstruction	9	22.2	4.7	-----	44.4	9.2	-----	44.4	12.4	-----
Open Reduction of Hip Fracture	9	11.1	8.7	-----	33.3	16.3	-----	33.3	21.4	-----
Prostatectomy	38	2.6	0.7	-----	2.6	1.7	-----	2.6	3.0	-----
Cholecystectomy	30	0.0	2.7	-----	0.0	4.4	-----	0.0	5.4	-----
Hysterectomy	4	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST THOMAS MORE/ST JOSEPH HOSPITAL
Medicare Provider Number: 060016

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.5 years
Proportion female	49.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.0 %
Transferred from skilled nursing facility	1.2 %
Admitted for elective procedure	15.4 %
Admitted for emergency	53.2 %

COMORBIDITIES:

Cancer	5.3 %
Chronic cardiovascular disease	35.2 %
Chronic liver disease	0.8 %
Chronic renal disease	1.6 %
Chronic pulmonary disease	21.1 %
Cerebrovascular degeneration	5.5 %
Diabetes mellitus	3.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.1%
State	8.7%
Outside State	3.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.5 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	277
Occupancy Rate	70.0 %
Ownership/Control	Church
Medicare Discharges	54.3 %
Case Mix Index (CMI)	1.0912

STAFFING:

Total Number of Physicians	31
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	45
Licensed Practical Nurses	28

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ST VINCENT GENERAL HOSPITAL

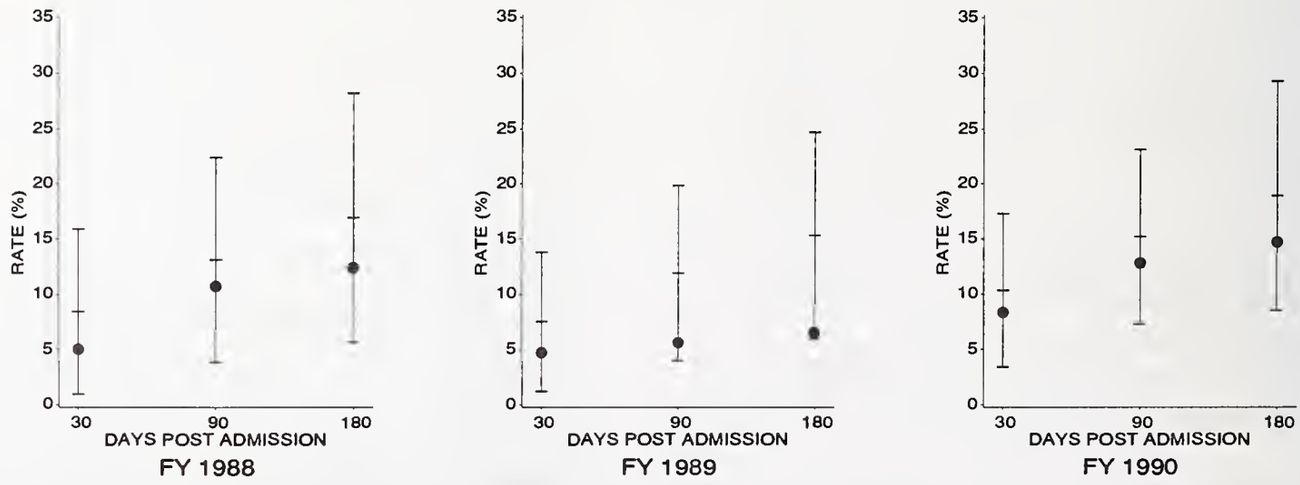
822 WEST 4TH STREET
LEADVILLE, CO 80461
Medicare Provider Number: 060029

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	109	8.3	10.3	3.5	12.8	15.2	4.0	14.7	18.9	5.2
CONDITIONS:										
Acute Myocardial Infarction	2	0.0	7.2	-----	0.0	9.3	-----	0.0	12.2	-----
Congestive Heart Failure	17	5.9	12.9	-----	5.9	21.0	-----	5.9	27.4	-----
Pneumonia/Influenza	8	12.5	13.0	-----	12.5	17.9	-----	12.5	21.0	-----
Chronic Obstructive Pulmonary Disease	4	0.0	9.8	-----	0.0	16.9	-----	0.0	21.4	-----
Transient Cerebral Ischemia	0									
Stroke	1	0.0	14.7	-----	0.0	19.6	-----	0.0	21.9	-----
Hip Fracture	0									
Sepsis	1	0.0	39.6	-----	0.0	46.6	-----	0.0	54.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	2	0.0	7.9	-----	0.0	13.2	-----	0.0	15.5	-----
Hysterectomy	1	0.0	0.2	-----	0.0	0.7	-----	0.0	1.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST VINCENT GENERAL HOSPITAL
Medicare Provider Number: 060029

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.1 years
Proportion female	45.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	58.7 %
Transferred from skilled nursing facility	0.9 %
Admitted for elective procedure	0.9 %
Admitted for emergency	52.3 %

COMORBIDITIES:

Cancer	5.5 %
Chronic cardiovascular disease	31.2 %
Chronic liver disease	0.0 %
Chronic renal disease	3.7 %
Chronic pulmonary disease	34.9 %
Cerebrovascular degeneration	2.8 %
Diabetes mellitus	2.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.5%
State	12.8%
Outside State	2.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.2 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	35
Occupancy Rate	37.0 %
Ownership/Control	District/Authority
Medicare Discharges	30.4 %
Case Mix Index (CMI)	0.9380

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

STERLING REGIONAL MEDICAL CENTER

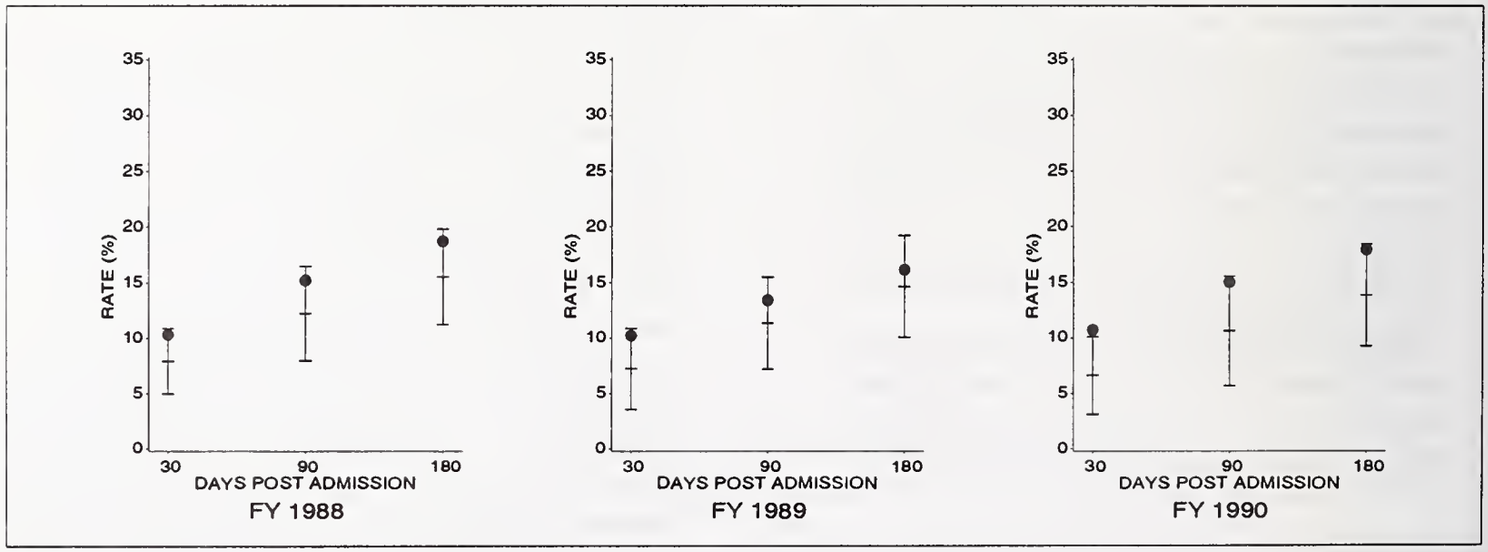
615 FAIRHURST ST
STERLING, CO 80751
Medicare Provider Number: 060076

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	468	10.7	6.6	1.7	15.0	10.6	2.5	17.9	13.8	2.3
CONDITIONS:										
Acute Myocardial Infarction	17	17.6	18.3	-----	23.5	21.6	-----	23.5	24.6	-----
Congestive Heart Failure	16	12.5	16.2	-----	25.0	25.5	-----	31.3	32.4	-----
Pneumonia/Influenza	15	26.7	10.5	-----	26.7	14.8	-----	33.3	17.9	-----
Chronic Obstructive Pulmonary Disease	14	7.1	9.1	-----	21.4	15.5	-----	21.4	20.2	-----
Transient Cerebral Ischemia	1	0.0	0.6	-----	0.0	1.6	-----	0.0	2.9	-----
Stroke	12	33.3	16.6	-----	41.7	24.2	-----	41.7	29.1	-----
Hip Fracture	20	20.0	7.4	-----	30.0	12.8	-----	30.0	16.6	-----
Sepsis	4	25.0	29.1	-----	25.0	42.9	-----	25.0	50.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	2	0.0	0.8	-----	0.0	1.9	-----	0.0	3.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	21	14.3	3.4	-----	19.0	6.2	-----	19.0	8.2	-----
Open Reduction of Hip Fracture	9	11.1	5.9	-----	22.2	10.4	-----	22.2	13.9	-----
Prostatectomy	30	0.0	0.9	-----	0.0	2.2	-----	0.0	4.1	-----
Cholecystectomy	14	0.0	2.9	-----	14.3	6.5	-----	14.3	9.8	-----
Hysterectomy	4	0.0	0.1	-----	0.0	0.1	-----	0.0	0.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



STERLING REGIONAL MEDICAL CENTER

Medicare Provider Number: 060076

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.3 years
Proportion female	54.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	76.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	72.0 %
Admitted for emergency	1.3 %

COMORBIDITIES:

Cancer	6.2 %
Chronic cardiovascular disease	30.6 %
Chronic liver disease	0.6 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	16.2 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	73.7%
State	21.4%
Outside State	4.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.6 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	36
Occupancy Rate	61.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	45.2 %
Case Mix Index (CMI)	1.2992

STAFFING:

Total Number of Physicians	24
Percent of Physicians Board Certified Specialists	70.8 %
Medical Residents/Interns	0
Registered Nurses	48
Licensed Practical Nurses	22

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

SWEDISH MEDICAL CENTER

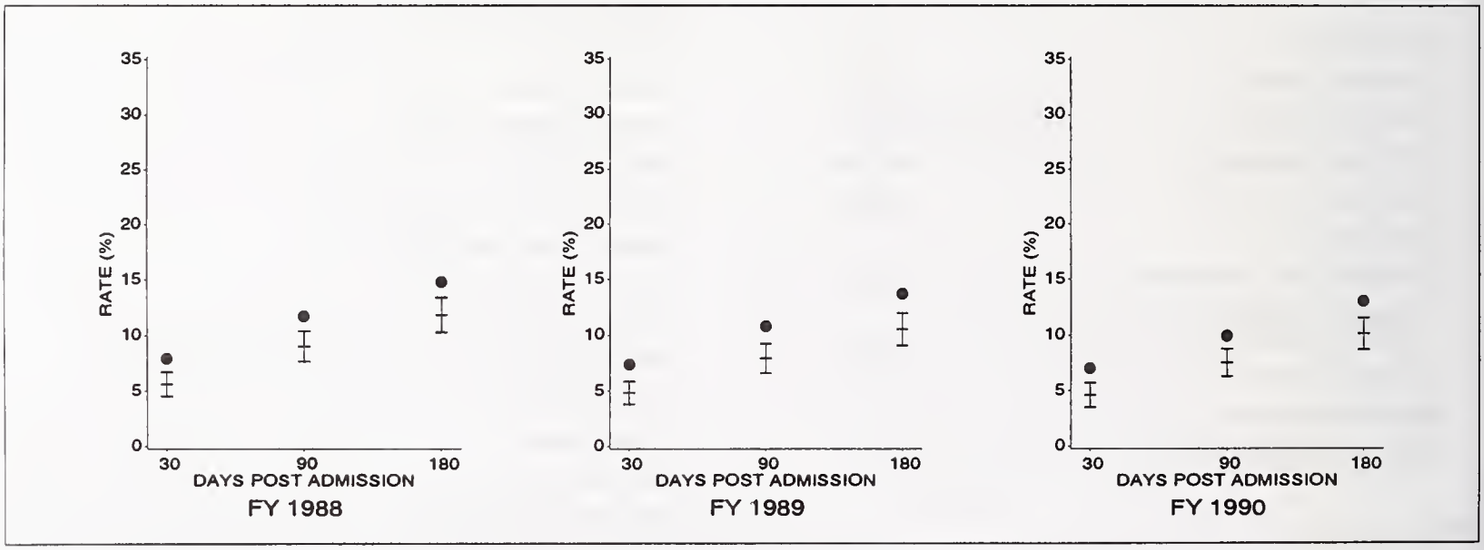
501 E HAMPDEN AVE
ENGLEWOOD, CO 80110
Medicare Provider Number: 060034

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2229	7.0	4.6	0.6	9.9	7.5	0.6	13.0	10.1	0.7
CONDITIONS:										
Acute Myocardial Infarction	78	23.1	18.7	5.5	26.9	21.9	5.5	26.9	24.9	5.1
Congestive Heart Failure	58	19.0	12.5	5.7	20.7	20.2	5.3	22.4	26.1	6.1
Pneumonia/Influenza	61	13.1	9.3	6.1	16.4	13.4	6.0	19.7	16.4	6.1
Chronic Obstructive Pulmonary Disease	37	10.8	5.0	-----	16.2	9.2	-----	18.9	12.8	-----
Transient Cerebral Ischemia	21	0.0	1.0	-----	4.8	2.6	-----	9.5	4.6	-----
Stroke	72	19.4	12.6	4.6	22.2	18.5	4.7	26.4	22.8	5.1
Hip Fracture	73	8.2	3.5	4.4	12.3	6.8	5.3	13.7	9.5	5.9
Sepsis	8	25.0	21.7	-----	37.5	32.6	-----	37.5	38.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	0.0	2.6	-----	0.0	5.3	-----	0.0	7.4	-----
Carotid Endarterectomy	6	0.0	0.9	-----	0.0	1.6	-----	0.0	2.4	-----
Hip Replacement/Reconstruction	72	1.4	1.2	2.9	2.8	2.5	2.9	2.8	3.7	3.4
Open Reduction of Hip Fracture	23	13.0	3.3	-----	17.4	6.4	-----	17.4	8.9	-----
Prostatectomy	76	0.0	0.7	1.1	0.0	1.7	1.9	0.0	3.1	2.9
Cholecystectomy	41	0.0	0.7	-----	0.0	1.4	-----	0.0	2.1	-----
Hysterectomy	41	0.0	0.3	-----	0.0	0.8	-----	2.4	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SWEDISH MEDICAL CENTER
Medicare Provider Number: 060034

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.9 years
Proportion female	59.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	93.0 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	98.6 %
Admitted for emergency	0.4 %

COMORBIDITIES:

Cancer	6.1 %
Chronic cardiovascular disease	22.7 %
Chronic liver disease	0.9 %
Chronic renal disease	1.3 %
Chronic pulmonary disease	12.9 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	3.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	43.7%
State	47.7%
Outside State	8.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.5 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	293
Occupancy Rate	69.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	27.6 %
Case Mix Index (CMI)	1.2654

STAFFING:

Total Number of Physicians	522
Percent of Physicians Board Certified Specialists	83.9 %
Medical Residents/Interns	4
Registered Nurses	425
Licensed Practical Nurses	14

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

UNIVERSITY HOSPITAL

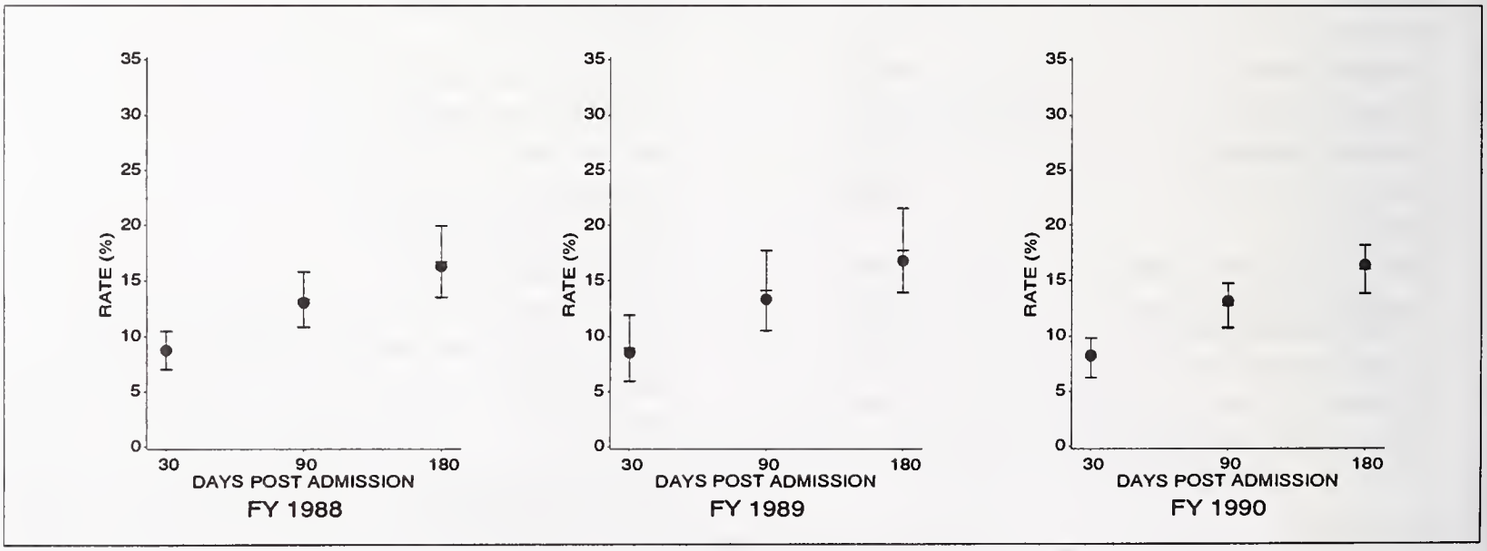
4200 E 9TH AVE
DENVER, CO 80262
Medicare Provider Number: 060024

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1200	8.2	8.0	0.9	13.1	12.7	1.0	16.4	16.0	1.1
CONDITIONS:										
Acute Myocardial Infarction	19	31.6	22.5	-----	36.8	25.6	-----	42.1	28.4	-----
Congestive Heart Failure	38	10.5	13.1	-----	18.4	21.6	-----	26.3	27.7	-----
Pneumonia/Influenza	36	22.2	14.2	-----	27.8	20.1	-----	30.6	24.0	-----
Chronic Obstructive Pulmonary Disease	16	6.3	8.9	-----	6.3	15.5	-----	12.5	20.0	-----
Transient Cerebral Ischemia	11	0.0	1.3	-----	0.0	3.0	-----	0.0	4.8	-----
Stroke	23	21.7	19.5	-----	21.7	26.5	-----	26.1	30.5	-----
Hip Fracture	17	0.0	7.5	-----	0.0	13.5	-----	5.9	17.1	-----
Sepsis	7	57.1	19.9	-----	71.4	27.7	-----	71.4	32.5	-----
PROCEDURES:										
Angioplasty	5	20.0	2.1	-----	20.0	2.8	-----	20.0	3.6	-----
Coronary Artery Bypass Graft	14	7.1	7.6	-----	21.4	11.3	-----	21.4	13.1	-----
Initial Pacemaker Insertion	2	0.0	1.9	-----	0.0	3.9	-----	0.0	6.1	-----
Carotid Endarterectomy	1	0.0	2.1	-----	0.0	3.6	-----	0.0	4.7	-----
Hip Replacement/Reconstruction	41	0.0	1.7	-----	0.0	3.2	-----	2.4	4.4	-----
Open Reduction of Hip Fracture	10	0.0	5.6	-----	0.0	10.5	-----	10.0	14.1	-----
Prostatectomy	29	0.0	1.0	-----	3.4	2.5	-----	6.9	4.3	-----
Cholecystectomy	11	0.0	4.2	-----	9.1	8.8	-----	9.1	12.7	-----
Hysterectomy	13	0.0	1.2	-----	0.0	2.6	-----	0.0	4.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNIVERSITY HOSPITAL
Medicare Provider Number: 060024

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	66.3 years
Proportion female	51.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	0.7 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	32.8 %
Admitted for emergency	63.5 %

COMORBIDITIES:

Cancer	9.5 %
Chronic cardiovascular disease	24.8 %
Chronic liver disease	1.9 %
Chronic renal disease	6.1 %
Chronic pulmonary disease	10.8 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	8.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	34.9%
State	52.8%
Outside State	12.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.9 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1991

PROFILE:

Total Beds	464
Ownership/Control	State Government
Case Mix Index (CMI)	1.5338

STAFFING:

Medical Residents/Interns	0
Registered Nurses	800
Licensed Practical Nurses	10

SPECIALTY SERVICES:

Burn Unit	Yes
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

VAIL VALLEY MEDICAL CENTER

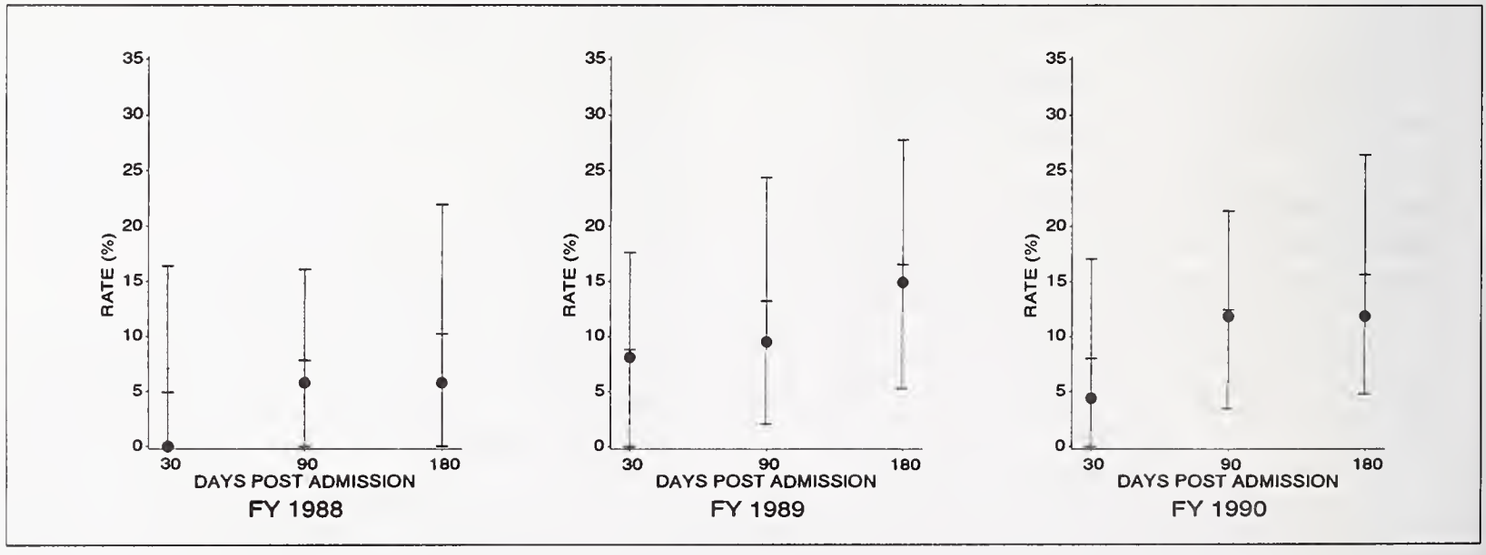
P O BOX 36
VAIL, CO 81657
Medicare Provider Number: 060096

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	68	4.4	8.0	4.5	11.8	12.4	4.5	11.8	15.6	5.4
CONDITIONS:										
Acute Myocardial Infarction	2	0.0	40.3	-----	0.0	44.0	-----	0.0	46.4	-----
Congestive Heart Failure	8	12.5	13.0	-----	37.5	20.6	-----	37.5	26.4	-----
Pneumonia/Influenza	3	0.0	8.9	-----	0.0	12.4	-----	0.0	15.3	-----
Chronic Obstructive Pulmonary Disease	7	0.0	8.3	-----	14.3	14.2	-----	14.3	18.5	-----
Transient Cerebral Ischemia	1	0.0	2.5	-----	0.0	5.6	-----	0.0	8.3	-----
Stroke	1	0.0	30.8	-----	100.0	44.0	-----	100.0	50.6	-----
Hip Fracture	5	0.0	3.8	-----	0.0	7.2	-----	0.0	10.1	-----
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	3	0.0	3.8	-----	0.0	7.7	-----	0.0	11.3	-----
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



VAIL VALLEY MEDICAL CENTER
Medicare Provider Number: 060096

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.3 years
Proportion female	51.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	10.3 %

COMORBIDITIES:

Cancer	2.9 %
Chronic cardiovascular disease	33.8 %
Chronic liver disease	0.0 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	25.0 %
Cerebrovascular degeneration	5.9 %
Diabetes mellitus	10.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	40.0%
State	14.4%
Outside State	45.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.3 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	49
Occupancy Rate	42.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	5.4 %
Case Mix Index (CMI)	1.1144

STAFFING:

Total Number of Physicians	39
Percent of Physicians Board Certified Specialists	71.8 %
Medical Residents/Interns	0
Registered Nurses	67
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

VALLEY VIEW HOSPITAL

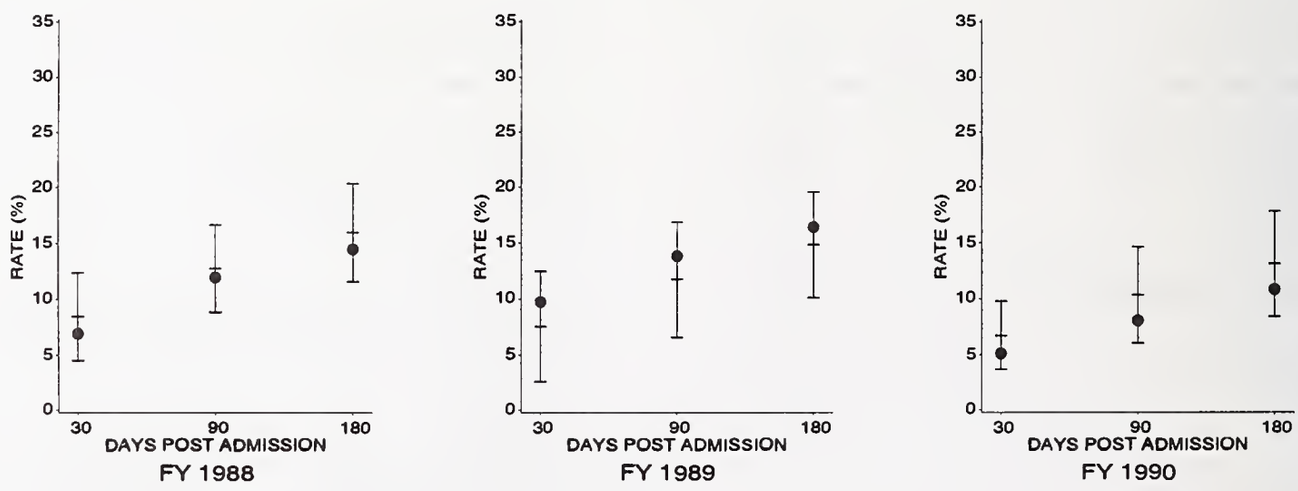
1906 BLAKE AVE
GLENWOOD SPRINGS, CO 81601
Medicare Provider Number: 060075

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	452	5.1	6.7	1.5	8.0	10.3	2.2	10.8	13.1	2.4
CONDITIONS:										
Acute Myocardial Infarction	13	23.1	19.7	-----	23.1	22.0	-----	23.1	24.4	-----
Congestive Heart Failure	18	11.1	12.9	-----	11.1	20.7	-----	11.1	26.8	-----
Pneumonia/Influenza	21	9.5	9.3	-----	9.5	12.9	-----	14.3	15.6	-----
Chronic Obstructive Pulmonary Disease	9	11.1	7.9	-----	22.2	13.4	-----	22.2	18.1	-----
Transient Cerebral Ischemia	4	0.0	1.0	-----	0.0	2.4	-----	0.0	4.2	-----
Stroke	12	0.0	16.1	-----	0.0	23.7	-----	8.3	27.7	-----
Hip Fracture	15	6.7	5.5	-----	13.3	10.4	-----	20.0	14.0	-----
Sepsis	6	0.0	19.7	-----	0.0	25.5	-----	0.0	29.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	5.2	-----	0.0	10.6	-----	0.0	16.3	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	21	0.0	2.5	-----	0.0	4.8	-----	4.8	7.1	-----
Open Reduction of Hip Fracture	6	16.7	6.0	-----	33.3	11.5	-----	33.3	15.4	-----
Prostatectomy	20	0.0	1.0	-----	0.0	2.4	-----	5.0	4.2	-----
Cholecystectomy	9	0.0	4.5	-----	11.1	9.4	-----	11.1	13.1	-----
Hysterectomy	4	0.0	0.2	-----	0.0	0.5	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



VALLEY VIEW HOSPITAL
Medicare Provider Number: 060075

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	58.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	68.8 %
Transferred from skilled nursing facility	2.0 %
Admitted for elective procedure	0.4 %
Admitted for emergency	28.5 %

COMORBIDITIES:

Cancer	4.0 %
Chronic cardiovascular disease	31.4 %
Chronic liver disease	1.1 %
Chronic renal disease	0.9 %
Chronic pulmonary disease	17.0 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	73.7%
State	19.3%
Outside State	7.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.0 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	57
Occupancy Rate	56.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.6 %
Case Mix Index (CMI)	1.2106

STAFFING:

Total Number of Physicians	39
Percent of Physicians Board Certified Specialists	87.2 %
Medical Residents/Interns	0
Registered Nurses	80
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

VENCOR HOSPITAL-DENVER

1920 HIGH STREET
DENVER, CO 80218
Medicare Provider Number: 060102

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	10	0.0	1.0	-----	0.0	2.2	-----	0.0	3.6	-----
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	0									
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

VENCOR HOSPITAL-DENVER

Medicare Provider Number: 060102

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission	71.9 years	Cancer	0.0 %
Proportion female	90.0 %	Chronic cardiovascular disease	0.0 %
ADMISSION SOURCES/TYPES:		Chronic liver disease	0.0 %
Referred by personal or HMO physician	80.0 %	Chronic renal disease	0.0 %
Transferred from skilled nursing facility	0.0 %	Chronic pulmonary disease	10.0 %
Admitted for elective procedure	60.0 %	Cerebrovascular degeneration	0.0 %
Admitted for emergency	10.0 %	Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	53.8%	Hospital	3.9 Days
State	30.8%	State	7.2 Days
Outside State	15.4%	National	8.6 Days
Total	100.0%		

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1988

PROFILE:		SPECIALTY SERVICES:	
Total Beds	68	Burn Unit	No
Ownership/Control	Private, For Profit	Coronary Care Unit	No
Case Mix Index (CMI)	1.2883	Hospice Care	No
STAFFING:		Intensive Care Unit	Yes
Medical Residents/Interns	0	Organ Transplant	No
Registered Nurses	19	Trauma Center	No
Licensed Practical Nurses	11	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
		Alcohol/Drug	No
		Rehabilitation	Yes
		Psychiatric	No
		Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WASHINGTON COUNTY PUBLIC HOSPITAL

465 MAIN ST
AKRON, CO 80720
Medicare Provider Number: 060074

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	43	7.0	10.6	-----	7.0	16.9	-----	7.0	21.2	-----
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	1	0.0	8.5	-----	0.0	13.0	-----	0.0	18.2	-----
Pneumonia/Influenza	11	0.0	12.0	-----	0.0	16.9	-----	0.0	20.3	-----
Chronic Obstructive Pulmonary Disease	3	0.0	8.9	-----	0.0	15.7	-----	0.0	21.4	-----
Transient Cerebral Ischemia	1	0.0	1.2	-----	0.0	3.5	-----	0.0	6.7	-----
Stroke	1	0.0	6.0	-----	0.0	9.5	-----	0.0	12.6	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation
was not computed for one or more of the three fiscal years,
(1988, 1989, or 1990)

WASHINGTON COUNTY PUBLIC HOSPITAL

Medicare Provider Number: 060074

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	79.0 years
Proportion female	67.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	97.7 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	23.3 %
Admitted for emergency	74.4 %

COMORBIDITIES:

Cancer	11.6 %
Chronic cardiovascular disease	14.0 %
Chronic liver disease	0.0 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	23.3 %
Cerebrovascular degeneration	7.0 %
Diabetes mellitus	2.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	95.9%
State	2.7%
Outside State	1.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1987

PROFILE:

Total Beds	11
Ownership.Control	Private, Non-Profit
Case Mix Index (CMI)	0.9238

STAFFING:

Medical Residents/Interns	0
Registered Nurses	5
Licensed Practical Nurses	1

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	No
Hospice Care	No
Intensive Care Unit	No
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

WEISBROD MEMORIAL COUNTY HOSPITAL

1208 LUTHER ST
EADS, CO 81036
Medicare Provider Number: 060047

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	10	30.0	12.1	-----	40.0	16.5	-----	40.0	20.3	-----
CONDITIONS:										
Acute Myocardial Infarction	1	100.0	34.4	-----	100.0	38.2	-----	100.0	43.4	-----
Congestive Heart Failure	0									
Pneumonia/Influenza	2	0.0	24.2	-----	50.0	31.8	-----	50.0	36.2	-----
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

WEISBROD MEMORIAL COUNTY HOSPITAL

Medicare Provider Number: 060047

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	81.9 years
Proportion female	70.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	100.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	0.0 %
Admitted for emergency	40.0 %

COMORBIDITIES:

Cancer	0.0 %
Chronic cardiovascular disease	30.0 %
Chronic liver disease	0.0 %
Chronic renal disease	10.0 %
Chronic pulmonary disease	10.0 %
Cerebrovascular degeneration	10.0 %
Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	61.5%
State	38.5%
Outside State	0.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	42
Occupancy Rate	71.0 %
Ownership/Control	District/Authority
Medicare Discharges	26.8 %
Case Mix Index (CMI)	0.8761

STAFFING:

Total Number of Physicians	1
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	3
Licensed Practical Nurses	1

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

WRAY COMMUNITY DISTRICT HOSPITAL

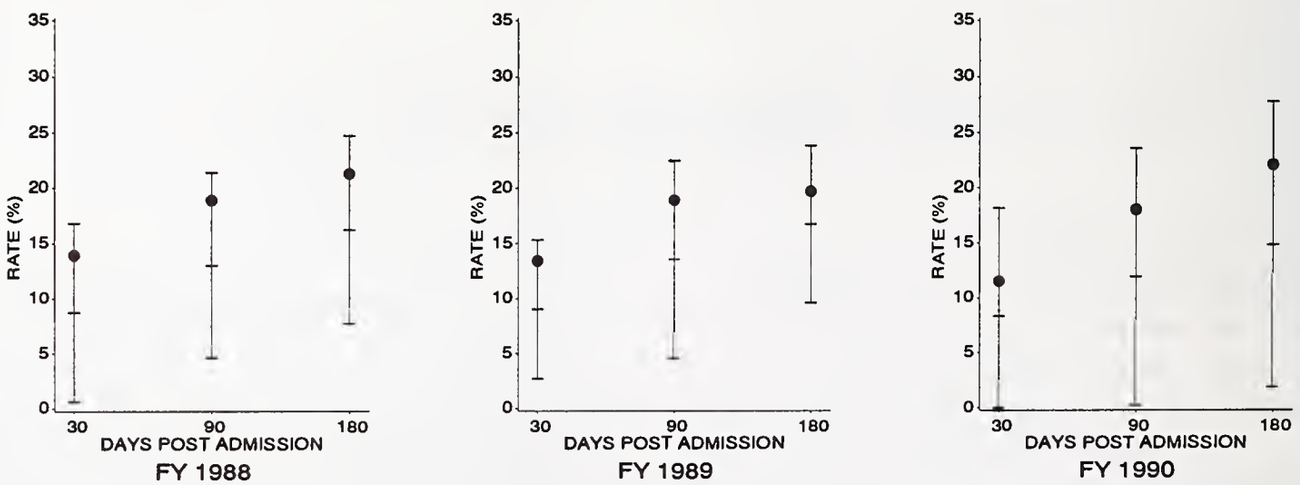
340 BIRCH ST BOX 65
WRAY, CO 80758
Medicare Provider Number: 060053

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	122	11.5	8.3	4.9	18.0	11.9	5.8	22.1	14.8	6.5
CONDITIONS:										
Acute Myocardial Infarction	8	50.0	29.5	-----	62.5	32.5	-----	62.5	35.6	-----
Congestive Heart Failure	4	25.0	8.5	-----	50.0	14.0	-----	75.0	18.1	-----
Pneumonia/Influenza	13	38.5	15.1	-----	46.2	20.1	-----	53.8	23.4	-----
Chronic Obstructive Pulmonary Disease	9	11.1	8.5	-----	22.2	15.1	-----	22.2	20.1	-----
Transient Cerebral Ischemia	1	0.0	1.7	-----	0.0	4.6	-----	0.0	8.1	-----
Stroke	3	33.3	16.5	-----	33.3	22.7	-----	33.3	25.8	-----
Hip Fracture	3	33.3	10.1	-----	33.3	17.5	-----	33.3	21.6	-----
Sepsis	1	0.0	5.1	-----	0.0	7.7	-----	100.0	10.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	3	0.0	1.5	-----	0.0	2.7	-----	0.0	3.6	-----
Hysterectomy	1	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) Is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WRAY COMMUNITY DISTRICT HOSPITAL

Medicare Provider Number: 060053

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	78.0 years
Proportion female	57.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	41.0 %
Transferred from skilled nursing facility	0.8 %
Admitted for elective procedure	9.0 %
Admitted for emergency	23.8 %

COMORBIDITIES:

Cancer	2.5 %
Chronic cardiovascular disease	27.0 %
Chronic liver disease	0.8 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	5.7 %
Cerebrovascular degeneration	2.5 %
Diabetes mellitus	5.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.1%
State	7.9%
Outside State	9.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.7 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	25
Occupancy Rate	16.0 %
Ownership/Control	District/Authority
Medicare Discharges	38.8 %
Case Mix Index (CMI)	0.9750

STAFFING:

Total Number of Physicians	3
Percent of Physicians Board Certified Specialists	33.3 %
Medical Residents/Interns	0
Registered Nurses	9
Licensed Practical Nurses	5

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

YUMA DISTRICT HOSPITAL

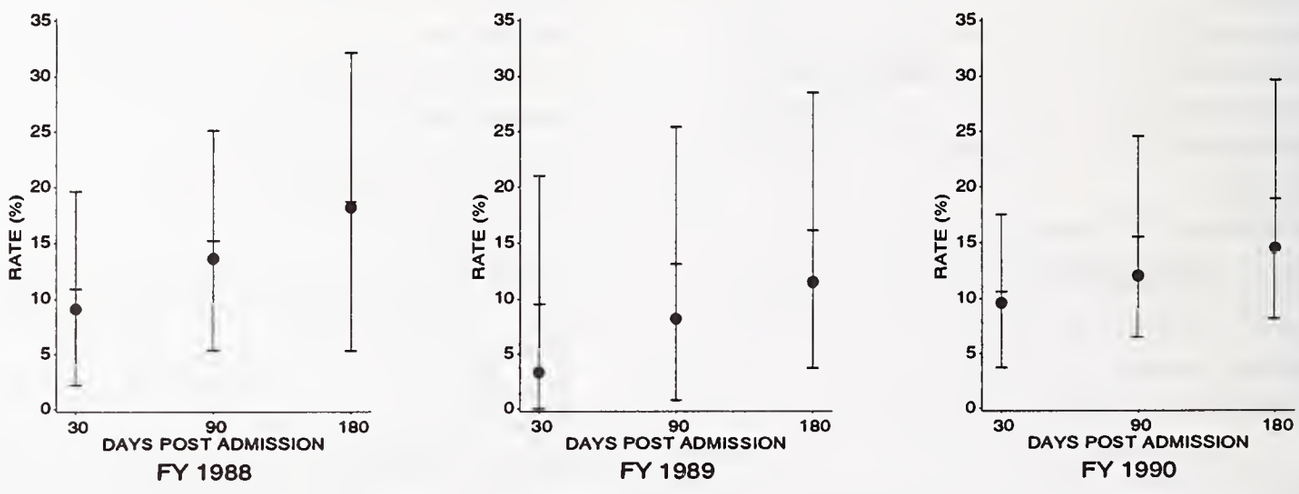
910 S MAIN ST
YUMA, CO 80759
Medicare Provider Number: 060056

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	83	9.6	10.6	3.5	12.0	15.5	4.5	14.5	18.9	5.4
CONDITIONS:										
Acute Myocardial Infarction	2	0.0	37.1	-----	0.0	39.7	-----	0.0	42.6	-----
Congestive Heart Failure	8	12.5	13.2	-----	12.5	19.9	-----	12.5	25.0	-----
Pneumonia/Influenza	4	50.0	18.3	-----	50.0	24.4	-----	50.0	28.1	-----
Chronic Obstructive Pulmonary Disease	9	0.0	9.6	-----	11.1	17.0	-----	11.1	21.8	-----
Transient Cerebral Ischemia	1	0.0	0.9	-----	0.0	2.3	-----	0.0	3.9	-----
Stroke	6	16.7	18.2	-----	33.3	23.5	-----	33.3	27.1	-----
Hip Fracture	1	0.0	2.1	-----	0.0	4.4	-----	0.0	7.4	-----
Sepsis	2	50.0	12.3	-----	50.0	15.9	-----	50.0	18.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



YUMA DISTRICT HOSPITAL

Medicare Provider Number: 060056

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.7 years
Proportion female	48.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.8 %
Transferred from skilled nursing facility	3.6 %
Admitted for elective procedure	1.2 %
Admitted for emergency	55.4 %

COMORBIDITIES:

Cancer	3.6 %
Chronic cardiovascular disease	37.3 %
Chronic liver disease	0.0 %
Chronic renal disease	2.4 %
Chronic pulmonary disease	9.6 %
Cerebrovascular degeneration	2.4 %
Diabetes mellitus	1.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	87.1%
State	12.0%
Outside State	0.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.4 Days
State	7.2 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	13
Occupancy Rate	30.0 %
Ownership/Control	District/Authority
Medicare Discharges	51.1 %
Case Mix Index (CMI)	0.9478

STAFFING:

Total Number of Physicians	1
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses	6
Licensed Practical Nurses	2

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

COLORADO

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	63,598	8.2	7.8	0.1	12.5	12.0	0.3	15.6	15.2	0.3
CONDITIONS:										
Acute Myocardial Infarction	1,982	22.8	23.4	1.1	26.0	26.3	1.1	27.8	28.9	1.1
Congestive Heart Failure	2,467	12.5	13.9	0.9	20.7	22.0	1.5	27.0	28.0	1.6
Pneumonia/Influenza	3,099	14.9	13.9	0.9	19.9	19.3	0.8	23.8	22.9	0.9
Chronic Obstructive Pulmonary Disease	1,240	8.9	7.3	1.0	14.4	12.9	1.3	20.4	17.2	1.6
Transient Cerebral Ischemia	723	1.9	1.6	0.6	5.0	3.7	1.3	6.6	6.1	1.5
Stroke	1,914	19.4	19.2	0.9	25.7	25.6	1.2	28.9	29.4	1.2
Hip Fracture	1,908	8.2	6.4	0.9	13.5	11.5	1.0	16.4	15.1	1.0
Sepsis	637	24.5	25.8	2.4	31.4	33.6	3.3	37.7	38.3	4.4
PROCEDURES:										
Angioplasty	601	4.2	3.6	0.8	4.7	4.5	0.9	5.3	5.4	1.0
Coronary Artery Bypass Graft	692	6.6	5.8	1.0	8.4	8.3	1.0	10.1	9.4	1.2
Initial Pacemaker Insertion	328	2.7	3.2	1.1	5.2	6.0	1.6	7.6	8.5	1.8
Carotid Endarterectomy	170	1.8	1.4	1.0	2.4	2.6	1.3	4.1	3.8	1.6
Hip Replacement/Reconstruction	1,549	3.4	2.8	0.6	5.9	5.2	0.8	7.3	7.1	0.8
Open Reduction of Hip Fracture	875	7.1	5.7	1.2	12.2	10.5	1.3	14.4	14.1	1.4
Prostatectomy	2,317	0.7	0.9	0.2	1.9	2.0	0.3	3.0	3.5	0.5
Cholecystectomy	1,410	3.9	2.5	0.8	6.0	4.7	0.8	7.2	6.2	0.8
Hysterectomy	576	0.5	0.6	0.3	1.0	1.3	0.5	1.9	2.1	0.6

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.0 years
Proportion female	55.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	54.7 %
Transferred from skilled nursing facility	0.9 %
Admitted for elective procedure	30.3 %
Admitted for emergency	30.8 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	32.5 %
Chronic liver disease	0.9 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	16.6 %
Cerebrovascular degeneration	4.3 %
Diabetes mellitus	6.2 %

ALL STATES

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	6,542,299	9.0	9.0	-----	13.9	13.7	-----	17.3	17.1	-----
CONDITIONS:										
Acute Myocardial Infarction	204,673	25.3	25.6	-----	29.5	28.7	-----	32.1	31.4	-----
Congestive Heart Failure	335,426	14.3	14.4	-----	22.9	22.8	-----	29.2	29.0	-----
Pneumonia/Influenza	313,303	15.3	15.5	-----	21.5	21.3	-----	25.5	25.1	-----
Chronic Obstructive Pulmonary Disease	107,387	8.0	8.0	-----	14.1	14.0	-----	18.7	18.5	-----
Transient Cerebral Ischemia	96,866	1.8	1.8	-----	4.0	4.0	-----	6.4	6.5	-----
Stroke	241,803	19.7	19.8	-----	26.5	26.3	-----	30.4	30.0	-----
Hip Fracture	163,386	6.7	6.5	-----	11.7	11.5	-----	15.1	15.0	-----
Sepsis	80,999	25.6	25.7	-----	34.6	33.8	-----	39.8	38.6	-----
PROCEDURES:										
Angioplasty	58,026	3.0	3.0	-----	4.0	4.0	-----	5.0	4.9	-----
Coronary Artery Bypass Graft	80,798	6.0	5.7	-----	8.3	8.1	-----	9.5	9.2	-----
Initial Pacemaker Insertion	49,642	3.2	3.3	-----	6.5	6.3	-----	9.1	9.1	-----
Carotid Endarterectomy	29,990	1.6	1.5	-----	2.8	2.8	-----	4.0	4.1	-----
Hip Replacement/Reconstruction	122,156	3.4	3.2	-----	6.2	5.9	-----	8.1	8.0	-----
Open Reduction of Hip Fracture	80,075	6.1	6.0	-----	11.2	11.0	-----	14.5	14.5	-----
Prostatectomy	211,087	0.9	1.0	-----	2.2	2.3	-----	3.7	3.8	-----
Cholecystectomy	124,259	2.9	2.7	-----	5.0	4.9	-----	6.5	6.5	-----
Hysterectomy	53,905	0.7	0.7	-----	1.4	1.5	-----	2.2	2.4	-----

* The Standard Deviation (SD) is not calculated.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.1 years
Proportion female	55.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.1 %
Transferred from skilled nursing facility	1.1 %
Admitted for elective procedure	22.0 %
Admitted for emergency	46.5 %

COMORBIDITIES:

Cancer	7.6 %
Chronic cardiovascular disease	36.6 %
Chronic liver disease	1.0 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	15.0 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	8.0 %

Hospital Comments

Boulder Community Hospital

March 18, 1992 **Medicare Provider #060027**

Gail R. Wilensky, Ph.D., Administrator
Healthcare Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attention: Robert Moore

Dear Mr. Moore:

Attached please find a copy of Boulder Community Hospital's Fiscal Year 1990 summary mortality data.

We would like to exercise our option to comment on the information presented in the summary:

> BCH has experienced an increase in the elderly population admitted to our hospital. These patients often present with chronic diseases that involve multi-system failures/complications as compared to past years. This is reflected in the comorbidity factors section of the report (i.e., chronic cardiovascular disease, chronic pulmonary disease, etc.). Our length of stay is well below national standards and is lower than state standards. The result is an increase in pneumonias and sepsis patients; however, hospital acquired infections in these two areas is well within national standards.

Thank you for allowing us to comment on the data; it is helpful information for us all.

Sincerely,

David P. Gehant, CEO

David P. Gehant, CEO
Boulder Community Hospital

P.O. Box 9019 North Broadway & Balsam Boulder, Colorado 80301-9019 303-440-2273

VHA • Member of Voluntary Hospitals of America Inc. •

Craig Hospital

HOSPITAL ID 060101

Caring exclusively for spinal cord and head injured patients.

3425 South Clarkson Street
Englewood, Colorado 8011
(303) 789-8000

March 16, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATT: Robert Moore

Dear Dr. Wilensky:

We would like to call attention to two items concerning the Medicare Hospital Information - 1992 for Craig Hospital:

1. The Social Security Administration erroneously reported one death having occurred at Craig Hospital at 180 days. The patient did not die during an admission to Craig. However, he did expire approximately nine months after discharge from Craig during an admission to another hospital in another state.

2. The following corrections should be noted in the hospital characteristics data obtained from the American Hospital Association's 1990 Annual Survey of Hospitals:

   Medicare Discharges. 30

   Total Number of Physicians 8

   Percent of Physicians Board Certified Specialists. 100.0%

Sincerely,

Dennis J. O'Malley
President

DJO/vmg

MERCY MEDICAL CENTER

PROVENANT HEALTH PARTNERS

1650 Fillmore Street
Denver, Colorado 80206-5000
303-393-3000

March 20, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
Attn: Robert Moore

Mercy Medical Center Provider #060026

Dear Dr. Wilensky:

We read with interest the Medicare Hospital Information FY 1990 statistics. We were pleased to see that Mercy Medical Center fell between the norms with the exception of being on the edge of the mortality rates for 90-180 days post admission. We fail to see the correlation between deaths of 90-180 days following hospital admission and good hospital care since the statistics do not take into account the severity of illness of the patient. If you could provide us with an explanation of the significance of deaths that occur 90-180 days post admission, we would be grateful.

Further review of your data indicates that we have a low (2.9%) transfer from skilled nursing homes. The data reports that 40.8% of our patients are admitted through the Emergency Department. We would like to point out that all patients from nursing homes are screened in the Emergency Department prior to admission. This data does not accurately reflect the higher percentage of patients admitted from nursing homes. Our inhouse statistics reflect that 10% of patients admitted to Mercy Medical Center come from nursing homes.

Sincerely,

Robert V. Elliott, M.D.
Medical Director
(303)393-3290

Ken Tomlon
Chief Executive Officer

crm

March 17, 1992 HOSPITAL ID#:060020

Gail R. Wilensky, Ph.D. Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Bldg.
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Ms. Wilensky:

We would like to have some additional information published with our mortality data from HCFA. After intensive study, we have concerns about HCFA's database. Comparison of your database to ours shows discrepancies. Our overall mortalities are within control for the diagnoses and procedures specified in the report you sent us.

For pneumonia/influenza there were two patients included in our mortality stats which should not have been because their death exceeded 180 days from their hospitalization. We could not find any mortalities in the 90-180 day period. Our statistics showed that 14 patients died in 30 days or less after discharge and two patients died 30-90 days after discharge. We also found that eight of the 16 patients had "Do Not Resuscitate" orders while in the hospital.

For the diagnosis of stroke, we found three patients included in our mortality stats which should not have been because their deaths exceeded 180 days from their hospitalization. We could not find any mortalities in the 90-180 day period. Our statistics show that 11 patients died in 30 days or less after discharge and two patients died 30-90 days after discharge. There were "Do Not Resuscitate" orders for seven of the 13 patients.

For the procedure of coronary artery bypass graft in the HCFA data, we could not find any mortalities for the 90-180 day and 30-90 day post discharge. One mortality was found in 30 days or less.

For the diagnosis of hip fracture, one patient's death exceeded the 180 days of discharge. The procedure of cholecystectomy raised some questions regarding the HCFA mortality data. Out of 38 patients, there were only three deaths, one for each category of 30, 90 and 180 days. We were questioning the higher observed mortality percent compared to the predicted.

Parkview participates in the MedisGroups program which is a clinical abstracting system that consists of reviewing every patient treated in our hospital. The review is based on key clinical findings, and the overall data is compared to MediQuals national comparative database of over 2.5 million records. The patients records who expired from pneumonia or strokes were abstracted.

For the stroke patients, it was found that one patient left against advice twice with a final severity of four, the highest severity possible. Eleven of the patients had a severity level of 3 and five had a severity level of four. All of the patients were very sick. Eleven of the patients were in a coma either upon admission or shortly after. The age distribution for the stroke patients was three in their 60s, six in their 70s, five in their 80s and two in their 90s. The average age is 77.5 compared to 73.7 used by HCFA. Of the 16 patients, six expired in a nursing home, nine in our hospital and one in a rural hospital.

parkview
EPISCOPAL MEDICAL CENTER
400 West Sixteenth Street, Pueblo, Colorado 81003, 719-584-4000

For our pneumonia patients it was found that nine patients had a severity level of two, four had a severity level of three and five had a severity level of four. The age distribution showed that one patient was 68, two were in their 70s, eight were in their 80s and seven were in their 90s. The average age is 85.88 compared to 73.7 years used by HCFA. Many of the severity 2s were in their late 80s and in their 90s and had "Do Not Resuscitate" orders. Of the 18 patients, four went to a nursing home and died there, ten died in our hospital, three were at home and one is unknown.

We did not find any trends per physicians treating the patients. All cases were justified for pneumonia or stroke. When we compared our mortality percentage with MedisGroups National Comparative Data base for pneumonia and strokes for January, 1991 through June, 1991, we found the following: Pneumoia mortality for PEMC is 3.9% compared to the national databank which is 9.3%; TIA and pre-cerebral occlusion mortality for PEMC 0% compared to the national databank which is 1%; stroke mortality for PEMC is 5.6% compared to 18% from the national databank.

We also calculated the statistical meaningfulness of the difference between observed and predicted mortality. We could not adjust for the discrepancy in the data given to us, so it is based on HCFA's data without adjustments.

For pneumonia patients, all categories were within the range at the 95% prediction level. For stroke patients, all categories were within the range at the 99% prediction level. For hip fractures, the 30 day category was within the range of 99% level, the 90 day category was in the range of the 95% level and the 180 day category was in the range of the 75% level. Carotid endarterectomies displayed 0 mortalities for 90 days and less and we were within the range of the 95% level for the 180 day category. For hip replacement/reconstruction, we had 0 mortalities for 30 days and we were within the range of the 95% level for the 90 & 180 day categories. For open reduction of hip fractures, all categories were within the range of the 95% level and for cholecystectomies, all categories were within the range of the 95% level.

We have quality improvement teams working on improving our overall processes of care for pneumonia patients, stroke patients and for patients with a hip fracture and any associated hip fracture surgery such as open reduction or replacement and reconstruction.

Our hospital is dedicated to quality improvement and we appreciate your organization's efforts to appraise the community of Medicare patient mortality outcomes. We too believe in working with representatives from other hospitals in our community, consumers, employers, medical staff members and state and national organizations to continually assess and improve the care we deliver.

Sincerely,

Michael Pugh, President/C.E.O.

MDP/jc

cc: C.W. Smith, C.O.O., Sr. V.P./Operations
John Schmidt, M.D., Chief of Staff
Keith Wilson, M.D., Medical Director Clinical QI

ST. ANTHONY HOSPITALS
CENTRAL•NORTH

PROVENANT HEALTH PARTNERS

4231 West 16th Avenue
Denver, Colorado 80204-1374
303-629-4350

Provider #060015

March 18, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
Attn: Robert Moore

Dear Dr. Wilensky;

We have reviewed the recently released HCFA mortality data.

We have serious concerns over the reliability and validity of your data. We have found numerous errors in your report which include the number of beds of our institutions which were overstated by approximately 30%. How many hospital deaths were you counting with our provider number? There are inconsistencies in your mortality data from one year to the next for the same reporting periods.

If by chance the data you have for our all causes category happens to be correct, the explanation for our minimally elevated all causes mortality rate, we believe, lies in the type of patient which comprises our hospital population. The 4,661 medicare cases seen in our hospitals during 1990, is much larger than that seen by the average hospital in this country. One of our hospitals is a major trauma center. We are committed to the elderly and have as a part of our hospitals system, five senior health clinics, an extended care unit, a rehabilitation unit and two skilled nursing facilities. We provide a multi-level living center for seniors and two home health nursing services. Approximately 40 nursing homes and two rehabilitation units refer their patients to our hospitals. A large number of these patients, perhaps most, are initially seen in the emergency departments and are then admitted. It is possible that they are mis-identified as emergency department admissions, hence, falsely lowering the predicted mortality rates published by HFCA.

Our patients tend to be old. The average age at admission may not be an accurate reflection of this. In 1990 there were 148 medicare patients, 85 years of age or older, who died within 30 days of admission. Of those, 94 died in the hospital, five died outside of the hospitals. There were 111 patients between 80 and 84 years of age who died within 30 days of admission. Seventy-seven died in the hospital. 34 died outside of the hospital. The total number of patients that died within 30 days and were 80 years or older was 259, or 52% of the observed 30 day mortalities. Of these deaths 88 died outside of the hospitals.

We have absolutely no control of mortalities occurring outside of our hospitals. Of our total, 499 deaths, those dying outside of the hospital within 30 days of admission, comprised 32% of the total deaths. This to us, is a meaningless statistic and should not be interpreted as a reflection of quality of care within our hospitals.

Patients sent for admission from nursing homes are very often hospitalized so that they do not die at the nursing home. Why should such a death be reflected in a mortality statistic, particularly as it relates to quality of care in that particular hospital? These patients must die somewhere.

Even though the HCFA mortality rates include a severity of illness adjustment, an article appearing in the Journal of the American Medical Association, January 1990, vol. 263 #2, points out the limitations of their model for making this adjustment. The findings in this study demonstrated that patients grouped according to admissions severity had markedly different mortality rates, which HCFA's models predictions could not differentiate. The HCFA model also failed to predict large differences in mortality between hospitals with low and high severity admissions.

In the listed conditions and procedures, as well as the all causes category, we have high outliers. In each instance, except the all causes category, the observed mortality rate is within two standard deviations of the predicted mortality rate; most were within one standard deviation.

This means that except for the all causes category, one cannot conclude that the differences represent other than chance variation.

Since January of 1991, St. Anthony Hospitals is addressing quality by using the Mediqual Medisgroups system of severity adjustment outcomes data. We believe these data are a more accurate indicator of quality of care than using the HCFA data, which appears to us inaccurate and meaningless.

Sincerely,

James G. Mann, M.D., Medical Director
Quality Management

Peter C. Donald, CEO
St. Anthony Hospitals

JGM/kd

Saint Joseph Hospital

THE LEADER. THE CHOICE.

#060028

March 19, 1992

Gail R. Wilensky, Ph.D.
Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187

ATTN: Robert Moore

Dear Mr. Moore:

I am writing to respond to the Health Care Financing Administration FY 1990 report on hospital mortality rates of Medicare patients. We would like the following information to be included in this year's publication:

The patient data for Saint Joseph Hospital apparently excluded Kaiser Permanente Medicare patients, who represented approximately 10% of the Hospital's total discharges. While the average length of stay reported in the HCFA study is accurate for non-Kaiser Medicare patients, it is appreciably different from the average length of stay for the Kaiser Medicare patients. Since the volume of Kaiser Medicare patients is approximately equal to Saint Joseph regular Medicare patients, we believe that all Medicare cases should have been included in your analysis. In addition, a review of the past HCFA mortality studies shows that the number of deaths at Saint Joseph is higher than the number our records indicate.

Overall, we are extremely pleased that our predicted mortality rates fall well within the ranges established by HCFA. We believe that our quality assurance and utilization review programs have played a major role in our favorable results. These findings are consistent with our designation by MedisGroups as a "benchmark" hospital in pneumonia and cardiovascular surgery, to of the areas also reviewed by HCFA.

Thank you for the opportunity to comment. Please do not hesitate to contact me at (303) 837-6750 if you have additional questions.

Sincerely,

Sister Marianna

Sister Marianna Bauder
President/CEO

1835 Franklin Street • Denver, Colorado 80218-1191 • (303) 837-7111

St. Mary Corwin Regional Medical Center
Medicare Provider #: 06-0012

Committed
To Our Credo:
I CARE
Innovation
Customer
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Respect
Excellence

March 16, 1992

Comments for Publication: FY 1990 Medicare Hospital Mortality Rates for St. Mary-Corwin Regional Medical Center

General Comments:

In reviewing the HCFA mortality rate report several caveats need to be understood by the reader: 1) sample size used by HCFA represented only 71% of our Medicare discharges FY 1990; 2) 25% percent of the mortalities occurred in residents of long term care facilities; 3) average age of the population was 78.7 years (at or near the actuarial life expectancy); 4) complications of care occurred at a rate of 0.85%; 5) this report does not distinguish between expected and unexpected deaths; 6) the report does not address differences in severity of illness, pertinent medical history or other factors which influence the probability of survival; 7) the report does not address the actual cause of death and notes only cessation of Social Security benefits as evidence of death; hence,traffic fatalities are given the same weight as death in the operating room; and, 8) St. Mary Corwin Regional Medical Center is a regional dialysis and cancer center which adds significant co-morbidity and risk to our population.

This report overlooks a key factor in mortality reporting by not incorporating the "Do Not Resuscitate" (DNR) requests of patients into the analysis. Since our experience shows that 75% of patients in this age group are likely to have DNR status, awareness of this decision is essential to interpretation of the data. 73.7% of the patients in the HCFA report had expressed wishes for Do Not Resuscitate status, correlating well with our findings in our Medicare population at large. (It should be noted that Federal Advance Directive law now require that a hospital inquire about DNR status on all patients on admission. As that occurs nationwide, there may well be an increase in mortality in most hospitals).

We feel that mortality beyond 30 days of discharge inaccurately reflects the true cause of death in patients and may not truly reflect outcomes as a measure of hospital care.

Special Comments:

We were pleased to see that the mortality rate in our patients fell within the confidence interval and lower than the mean in patients with: acute myocardial infarction, chronic obstructive pulmonary disease, transient ischemic attacks, hip fractures, transurethral resection of the prostate and hysterectomies.

In view of nationwide concern over the outcomes of coronary artery bypass surgery, we would like to emphasize St. Mary Corwin's mortality rate of 0% in Medicare patients with this procedure, which accurately reflects our program's excellence.

ST. MARY-CORWIN
REGIONAL MEDICAL CENTER

1008 Minnequa Avenue
Pueblo, Colorado 81004-3798
719-560-4000

A member of the Sisters of Charity
Health Care Systems, Inc.

We also fell within the confidence limits for mortality, but slightly above the mean for congestive heart failure, cerebrovascular accidents, angioplasties, hip pinnings and open reduction with internal fixation of hip fractures. We analyzed these deaths and found that these differences were not statistically significant.

In the following procedures or diagnoses, because there was no confidence limit set by HCFA or because of the volume, we undertook detailed analysis which demonstrated that the mortalities were expected and unavoidable:

Pneumonia

When analyzing these cases with adjustment for severity of illness, we found that our mortality rate in these patients is 25% lower than the national average of cases matched for severity of illness and age.

Sepsis

Ten (10) of 25 (40%) patients in the group died within 30 days of discharge, where the HCFA mean was 26.2%. Analysis of these deaths showed than the average age in this group was 80 years with a median of 82 years. Three (3) patients had chronic renal failure, 1 had lymphoma (and died from lymphoma later), 3 had cancer, and 1 was transferred with sepsis from another hospital with a gangrenous extremity.

Pacemaker Insertion

Two (2) of 17 (11%) died overall in this group. One patient was 82 years old with squamous cell carcinoma of the lung and the other was 79 years old with severe interstitial lung disease and died from complications of other diseases.

Cholecystectomies

This hospital showed excessive mortality last year and our response showed that most of those individuals had carcinoma as their cause of death. This year the mortality for this procedure at St. Mary Corwin hospital is within the confidence limits set by HCFA. Six (6) of the 87 patients in this group died: 1 with CA of the colon at age 74 who died at 191 days after the procedure; 1 had cancer of the pancreas at age 78; 1 at age 80 was discharged from the hospital and died later of an unrelated cause; 1 had CA of the gallbladder at age 69; 1 was admitted at age 73 with severe cholangitis and presumed sepsis; 1 at age 84 was discharged to a nursing home and died later with a "Do Not Resuscitate" status.

The HCFA mortality data has been thoroughly reviewed and evaluated. It actually represents a small piece of the quality assessment and improvement activities of St. Mary Corwin Regional Medical Center that are carried out by the hospital and medical staff on a daily basis. Our own database which includes 100% of patients discharged, adjusts outcome data with severity of illness. These reports, in addition to individual case review and presentation by physicians, are reviewed each month by 9 clinical departments. The St. Mary Corwin Medical Staff collectively spends over 200 hours each month reviewing quality and outcome results to identify opportunities to improve patient care for Southern Colorado. We feel the HCFA mortality reports, as they improve, represent another tool which we can use to continually evaluate and monitor the care of our patients.

ST. MARY'S HOSPITAL
The Regional Medical Center

#060023

March 13, 1992

Health Care Financing Administration
Gail R. Wilensky, Ph.D., Administrator
Medicare Hospital Information
Bureau of Data Management & Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attn: Robert Moore

Dear Mr. Moore:

We have evaluated the Medicare FY1990 Mortality Statistics for our facility and request the following comments be included in the publication:

> "There were five patient deaths in the diagnosis category of Transient Cerebral Ischemia. Further study of these cases revealed four of these five patients had experienced full cerebrovascular accidents and were coded into the wrong principal diagnosis and DRG. These patients strokes were felt to be caused by severe carotid artery stenosis and resulted in the coding of Transcerebral Ischemia. All four stroke patients were not unexpected deaths and had an average age of 81 years. The other patient death was admitted for a TIA and was discharged in an improved condition. Unfortunately, her long term prognosis was poor due to her significant COPD, malnutrition and other chronic heart problems. She died 54 days after discharge from our facility as a result of her multi-system failure at the age of 89."

2635 North 7th Street • P.O. Box 1628 • Grand Junction, CO 81502-1628 • (303) 244-2273

Affiliate of Sisters of Charity of Leavenworth Health Services Corporation, Inc.

In addition, we respectfully request two changes to Hospital Characteristics under Specialty Services:

Burn Unit	Yes -	Effective 1986
Other Intensive Care. . . .	Neonatal ICU -	Effective 1985

We appreciate the opportunity to respond.

Sincerely,

ST. MARY'S HOSPITAL & MEDICAL CENTER

Sister Lynn Casey
President

Vencor Hospital · Denver

1920 High Street
Denver, Colorado 80218
(303) 320-5871
(303) 377-6212 Fax

Hospital ID# 060102

March 17, 1992

Gail R. Wilensky, Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Blvd.
Baltimore, Maryland 21207-5187
Attn: Robert Moore

Dear Ms. Wilensky,

The Medicare Hospital Information - 1992 for Vencor Hospital•Denver is misleading. The patients listed are accurate; however, care provided was under two separate hospital entities. Only three patients were discharged from Vencor Hospital•Denver. All remaining patients listed were discharged from the hospital under previous ownership/provider Mark V, d/b/a Doctor's Hospital, Inc. The hospital's name and management changed from Doctor's Hospital, Inc. to Vencor Hospital•Denver in July of 1990.

Sincerely yours,

VENCOR HOSPITAL•DENVER

Mr. John V. Oliver
Administrator

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